

Leadership Pledge Form

United Way of
Henry County & Martinsville



Your Information (Please Print clearly)

Mr. Mrs. Ms. Dr.

Company / Employer _____

Name _____

Address _____ City _____ State _____ ZIP _____

Email: _____ Phone: _____ Home Mobile

Preferred Contact Method: U.S. Mail Email Phone

Choose Your Giving Level!

The United Way of Henry County & Martinsville would like to challenge you to join us in advancing **the education, health, and financial stability of our community.** By joining our Leadership Circle at any of the provided levels, you pave the way for others to get involved and **#LIVEUNITED!**

\$600-1,199	Bronze	<input type="checkbox"/>
\$1,200-2,999	Silver	<input type="checkbox"/>
\$3,000-5,999	Gold	<input type="checkbox"/>
\$6,000-9,999	Platinum	<input type="checkbox"/>
\$10,000+	Tocqueville Society	<input type="checkbox"/>

I / We will pledge to the United Way, but not at the Leadership Circle Level at this time.

Your Pledge

I / We pledge the amount of \$ _____ to the United Way of Henry County & Martinsville.

I / We pledge the below **additional** amount to **sponsor a child** (or children) aged at 5 years or less, to receive a **book** each month by mail for an entire year through the **Dolly Parton's Imagination Library** program.

\$27.00 (1 Child) \$54.00 (2 Children) \$81.00 (3 Children) \$_____ (____ Children - \$27 per child)

Does Your Employer have a matching gift program?

Yes No Unsure

If yes, please contact your HR Department for the appropriate documentation. *Company Matches are added to your giving level.*

Total Annual Pledge (Campaign + Sponsor) = \$ _____

In Gratitude

Please Recognize my/our Gift as Anonymous

Please Recognize my Gift in Honor of:

Please Recognize my/our Gift as: _____

Payment Options

Please Choose Your Payment Option Below

Payroll Deduction

Stock Gift

Payment Enclosed (Cash / Check)

Invoice Me Beginning (mm/dd/yy): _____

Credit Card (One Time / Monthly / Round-Up)
(Go to UnitedWayofHCM.org: click DONATE)

Please Bill Me:

Quarterly (4) Annually (1)

Bill Me Via:

U.S. Mail

Email

Pledge Signature: _____ Date: _____

In compliance with the Internal Revenue Code, we the United Way of Henry County and Martinsville acknowledge that no goods or services were exchanged in consideration of the contribution. EIN 54-0753318.

United Way of
Henry County & Martinsville



My Leadership Pledge Total: \$ _____ *Thank you for your support!*

Please retain a copy of this form for Tax purposes. EIN 54-0753318.

Direct questions to Rebecca Conter | 276-638-3946 x110 | Rebecca@UnitedWayofHCM.org.