



Contribution Pledge Form

CONTRIBUTOR INFORMATION

Your personal information is always kept confidential.

Title: _____ Full Name: _____

Street Address: _____

City: _____ Postal Code: _____

State: _____ Country: _____

Phone Number: _____ E-mail Address: _____

DONATION

Amount (\$5,000 minimum): \$ _____

One Time Every Year

METHOD OF PAYMENT

Payment (exclusive of bank charges) is made payable to **The 1000 Villages Foundation.**

Check

Wire (*For wire information please contact: donations@the1000villagesfoundation.org*)

Please return this form with your check or wire receipt to:

The 1000 Villages Foundation
2525 Wallingwood Drive - Suite 804
Austin, TX 78746

Signature _____

Date _____

