

PLEDGE AND ACKNOWLEDGEMENT FORM

CHAPTER ROOM CHAIRS, ANGELS OF THE CREST & PAVERS

Donor Name(s): _____

Address: _____

Phone: _____

Email: _____

Please provide your email address as this is how we will contact you to confirm the wording of your space, paver, etc.



_____ My gift of \$2,000 should be recognized on a **Chapter Room Chair** as follows:

Name (Arkansas Alpha's only): _____

Initiation Year: _____

_____ My gift of \$1,000 should be recognized on the **Angels of the Crest** recognition outside the Chapter Room as follows:

Please note that any initiated member of Pi Beta Phi from any Chapter may be recognized as an Angel of the Crest. \$1,000 per name; members may be listed together.

Name _____ Initiation Year: _____

Name _____ Initiation Year: _____

Name _____ Initiation Year: _____

_____ My **Courtyard Paver** should be recognized as follows:

_____ of Small Pavers at \$1,000 each for a total of \$ _____

_____ of Large Pavers at \$1,909 each for a total of \$ _____

Small pavers consist of 3 lines of text with up to 20 characters on each line (*including spaces*)

Large pavers consist of 6 lines of text with up to 20 characters on each line (*including spaces*)

Line 1 _____

Line 2 _____

Line 3 _____

Line 4 _____

Line 5 _____

Line 6 _____

We encourage you to include the Chapter and Initiation Year of all members of Pi Beta Phi to be listed. In addition, if anyone served as Chapter president, please include that information along with the year served. Members of all Pi Phi Chapters are welcome to be recognized (with the exception of Chapter Room Chairs which are reserved for Arkansas Alpha members only).

_____ I have enclosed a check for my total made payable to *The Arkansas Alpha Chapter House Corporation*.

_____ Please charge my credit card for my total payment due (a 2% processing fee will apply).

If paying by credit or debit card, please include the following information:

Visa MasterCard Discover Amex

Name _____

Card Number _____ Expiration Date _____ Security Code _____

Billing Address _____

Total Amount To Be Charged Including 2% Processing Fee \$ _____

Signature _____ Date _____

_____ Please bill me in four equal installments (due in 2017, 2018 and 2019)

Please note that all pledges must be paid in full by December 31, 2019.

Please Return this form to:
Pi Beta Phi - The Second Century Campaign
c/o: Misty McIlroy Hawkins, Co-Chair
5240 Edgewood Road | Little Rock, Arkansas 72207

For information about larger donations (\$3,141.59 and above) that qualify for tax deductible giving, please contact Misty McIlroy Hawkins at 501-666-7474 or mhawkins@aristotle.net

