



Colts Corner Bin Town Child Care Pledge Form

Please mail or scan/email this form to the contact below.

I/We wish to make a gift to Colts Corner Bin Town Child Care.

I/We commit to the following:

Total Amount of Gift: \$ _____

Initial Payment: \$ _____

Balance: \$ _____

Payable: One-time or Over 1 Year 2 Years 3 Years Beginning Date: __/__/____

Payment Schedule (Circle One): Monthly / Quarterly / Semi-Annually / Annually

Signature: _____ Date: _____

Personal Gift or Corporate

Company/Organization (If appropriate): _____

Name (s): _____ Title: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

For Donor Recognition, I understand my name/company name will be listed as I have written above.

I wish to remain Anonymous.

My gift is in Honor/Memory of: _____

Please make checks payable to: Colts Corner Bin Town Child Care

Mail or hand deliver to: United Bank & Trust Company, 202 E. Gilman St., Sheffield, IA 50475

Contact: Sara Shreckengost, Center Director, ccdcbintown@gmail.com