\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Date)

**PLEDGE AGREEMENT**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To support the sustainability of the théâtre l’Escaouette, I (we), \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, pledge a total of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to the Fondation du téâtre l’Escaouette (hereafter named “Fondation”).

To fully respect your wishes and to avoid mistakes, write clearly in printed letters or fill out electronically and return this form along with your contribution.

 Yes  No I accept that my name be published in the Fondation’s donor list.

 Yes  No I accept that my name be placed on the permanent donor recognition board which will be predominantly displayed at the théâtre l’Escaouette.

 Yes  No I accept to be publicly acknowledged on the Fondation’s website as well as in the media.

If you have said “Yes” to any or all of the questions above, please clearly indicate the name you wish for your contribution to be recognized under.

(Name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Indicate the desired frequency of engagement towards the Fondation:

 Monthly  Quarterly  Semi-Annually  Annually

First payment to be made \_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Month) (Year)

Payment method:  check (please include the right number of postdated checks)  credit card

Credit card number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiration:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please make checks:

*La Fondation du théâtre l’Escaouette*

and send to the following address:

Fondation du théâtre l’Escaouette

170 Botsford Street, Moncton, NB E1C 4X6 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature(s)