

## Pledge Form

To make an on-line pledge to Cleveland Scholarship Programs, please complete and submit the form below.

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Full Name\*

Street Address\*  City\*  State\*  Zip\*

Country (if other than the U.S.)\*

Email\*  Phone

Are you a CSP Alumni?  Yes  No

Does your Employer have a matching gift program?  Yes  No

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Pledge amount\*  \$

I will pay this pledge in the following installments:

Monthly  \$

Quarterly  \$

Annually  \$

Semi-annually  \$

I would like to pay this pledge over

One year

Two years

Three years

When would you like to start your payments?

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Would you like credit for this pledge to be shared with anyone else?  Yes  No

If yes, please provide: Name \_\_\_\_\_

Address \_\_\_\_\_

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Please contact the Development Team at 216-241-5587 if you would like to discuss "Leaving a Legacy" options or have any questions regarding making a pledge.

\* indicates a required field