



THE CALVERTON FUND

FACULTY/ STAFF ANNUAL GIVING PLEDGE FORM

Employee Last Name

Employee First Name

Last year you donated a total of \$ _____ to The Calverton Fund.

I would like to donate a total of \$ _____ to The Calverton Fund for fiscal year 2019-2020.

Ways to Give (choose one):

Credit card – please make your donation online at http://weblink.donorperfect.com/calvertongiving

Check – please make out to The Calverton School and give to the Development Office

Cash – please bring to the Development Office

Payroll deduction – please complete the following and return to the Development Office

I want to schedule a payroll deduction for The Calverton Fund in the 2019/2020 fiscal year.

Take the deductions from my semi-monthly paycheck according to the following schedule:

- Semi-Monthly paycheck deduction amount: \$ _____ (minimum semi-monthly deduction is \$5)
Number of Pay Periods: _____ (from 1 to 20) Pledge must be paid in full by June 2020.
Starting month/date/year: _____ Final month/date/year: _____
Family of Funds (circle one):
School's Greatest Needs Student Support Academic Enhancement
Fine and Performing Arts Athletics
I hereby authorize the Business Office to deduct funds from my paycheck, as indicated above, for deposit to The Calverton Fund.

Signature: _____ Date: _____

- My total gift amount will be: \$ _____

Table with 2 columns: Per pay period, Total Contribution. Rows for 10 pay periods with amounts from \$5.00 to \$50.00.

Table with 2 columns: Per pay period, Total Contribution. Rows for 20 pay periods with amounts from \$5.00 to \$50.00.

I would like my gift to remain anonymous. __ Yes __ No (check one)

How would you like to be recognized on the annual donor report? _____

___ I would like my payroll deductions to rollover into the 2020/ 2021 school year.

Signature _____ Date _____