

RAPP PARK CONNECTOR TRAIL

PLEDGE FORM

Thank you for supporting the Wabash Trace Rapp Park Connector Trail. This collaborative project will benefit residents and visitors to southwest Iowa well into the future, providing safe active transportation routes, important outdoor recreation connections, and access to nature and services for all ages and abilities. Contributors will be recognized in accordance with the stated Donation Levels, and we welcome gifts of any size. Each contribution gets us closer to our goal!

DONOR CONTACT INFORMATION

Donor Recognition Name: _____ Anonymous Gift
Contact Name: _____ Email: _____
Address: _____
City, State, Zip: _____ Phone #: _____
Donor type: Individual/Family Business Non-Profit Other: _____

PAYMENT DETAILS

Completion of this pledge agreement not only helps us plan for the future of this trail connection, but also helps us demonstrate local support of the project to our other funders. We will not share your personal information with anyone else, except in cases of public recognition of donors unless you have marked that you wish the gift to be anonymous. If you are choosing to pay by Credit/Debit Card we will initiate a charge to your card upon receipt of this pledge form and annually after that, according to your wishes detailed below. If you are choosing to pay by check, please include the Year 1 pledge amount with this agreement, and we will invoice you annually according to your wishes detail below. Donor recognition will align with correlating Donation Levels.

Total pledge amount: \$ _____ Today's Date: _____

Pledge period: Single Year/One-Time Multi-Year (indicate breakdown below)

Year 1: _____ Year 2: _____ Year 3: _____ Year 4: _____ Year 5: _____

Payment method: Check Credit/Debit Card

Credit card number: _____ Exp: _____ Ccv: _____

Name on card: _____

Billing Address, City, State, Zip: _____

I authorize the credit card to be charged the amount specified above on an annual basis until the pledge has been fulfilled.

Signature