



Donation/Pledge Form

Child & Family Services

Helping Children, Helping Families, Helping Our Community

Donor Information (please print or type)

Name	
Street Address	
City/State/Zip	
Telephone	
Cell Phone	
Fax	
E-Mail	

Payment Information

I (we) make this contribution in the form of:

Cash Check Credit Card Pledge (please invoice me)

I (we) wish to help now with a financial contribution of \$_____.

Credit card type: MasterCard or Visa only	
Credit card number	
Expiration date	
Signature	

Thank you for our help!

I (we) pledge a total of \$_____ to be paid: now monthly quarterly yearly.

Gift will be matched by (*company/family/foundation*): form enclosed form will be forwarded.

Acknowledgement Information

Please acknowledge this donation in honor of: _____

Please acknowledge this donation in memory of: _____

(we) wish to have our gift remain anonymous

Please print this form and send to: Child & Family Services, Attn. Development Office
4287 Five Oaks Drive, Lansing, MI 48911

Child & Family Services is a charitable organization with 501(c)(3) status. Your donation is tax deductible.