

# The Beaver Island Community Center

*At The Heart of a Good Community*

Yes, I support the Campaign to build a Community Center for Island visitors and residents.

**Accordingly, I pledge the sum of**

\$ \_\_\_\_\_ as my gift.

**I Want My Gift to go For:**

Construction of the Center Itself: \_\_\_\_\_

Furnishing or Equipping the Center \_\_\_\_\_

An Endowment for Center Operations: \_\_\_\_\_

Programs that will be offered at the Center \_\_\_\_\_

**My commitment will be paid as follows:**

Paid in Full, \_\_\_ over: One \_\_\_\_, Two \_\_\_\_, or Three \_\_\_\_ yrs.

Paid: Annually \_\_, Semi-Annually \_\_ Quarterly \_\_, Monthly \_\_

Beginning in: Month \_\_\_\_\_ Year \_\_\_\_\_

Need a reminder? no, \_\_\_\_\_ yes, \_\_\_\_\_ when, \_\_\_\_\_

Donor \_\_\_\_\_

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

\_\_\_\_\_

Phone(s) \_\_\_\_\_, or, \_\_\_\_\_

e-mail: \_\_\_\_\_

Donor Signature: \_\_\_\_\_

**Please Make Checks Payable to:**

**Charlevoix County Community Foundation, and,**  
✓note its intent for the Beaver Island Community Center  
✓and, know that your contribution is tax deductible

**Please Charge my Credit Card:**

Mastercard \_\_\_\_\_, Visa \_\_\_\_\_

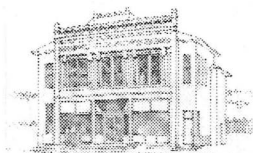
Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature \_\_\_\_\_

If this is a memorial/commemorative gift, please print the name(s) of those being remembered: \_\_\_\_\_

\_\_\_\_\_

*please complete this form and mail to:*



Preservation Association of Beaver Island  
P.O. Box 494  
Beaver Island, Michigan 49782