Fenwick Fund Annual Giving
Pledge Commitment

I/We are happy to support the mission and vision of Fenwick High School.

I/We pledge $ _____ in support of The Fenwick Fund.

- ❑ This is a one-time contribution.
- ❑ Multi-year pledge to be paid over _____ years beginning in _____ (month) of _____ (year).
- ❑ My/our first pledge payment of $ _____ is enclosed.
- ❑ Please check this box if your company matches charitable gifts. If checked, someone from the Institutional Advancement team will follow up with you about this opportunity.

Please send me a reminder **one month** in advance of commitment schedule below:

- ❑ Annually in _____ (month)
- ❑ Semi-annually in _____ (month) and _____ (month)
- ❑ Quarterly in _____, _____, _____ (list months), _____

Method of Payment:

- ❑ Check payable to Fenwick High School
- ❑ Securities
- ❑ Credit Card

Credit Card Company _____ Number _____ Exp. _____ CVV Code _____

Name (as it appears on card) _____

Billing address _____

Name: _____

Address: _____

Phone: _____ Email: _____

_____ _____ _____

Signature(s) Date

_____ _____

Please print name(s)

❑ I wish to remain anonymous

Return your commitment to:
Fenwick High School Advancement Office | 505 Washington Boulevard | Oak Park, IL 60302