



CNHS Restoration Pledge Form

Cardinal Newman High School

For the cafeteria to be completed summer 2010.

Donor Information (please print or type)

Name	
Billing Address	
City	
State	
Zip Code	
Telephone (Home)	
Telephone (Business)	
Fax	
E-Mail	

Pledge Information

I (we) see the need to renovate the CNHS cafeteria and would like to participate in this project.

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

I (we) would like to talk about naming opportunities: ___ yes ___ no.

I (we) plan to make this contribution in the form of: ___ cash ___ check ___ credit card ___ other.

Credit Card Type	
Credit Card Number	
Expiration Date	
Authorized Signature	

Gift will be matched by _____ (company/family/foundation).

___ Form enclosed ___ Form will be forwarded

Acknowledgement Information

Please use the following name(s) in all acknowledgements:

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___ I (we) wish to have our gift remain anonymous.

Signature(s)
Date

Please make checks, corporate matches, or other gifts payable to:

Cardinal Newman High School – "CNHS Cafeteria Fund"

512 Spencer Drive

West Palm Beach, FL 33409

Phone: 561-688-8085

Fax: 561-683-7307

For any question you may have, call Kirsten Johnson, Dir. of Institutional Advancement: Cell # 479-799-2908.