



## STEP 1 – PLAN

**YES, I would like to become a partner of The Inspirations Society...**

- LEARNING PARTNER**  
\$1,000 per year for 5 years
- WORKING PARTNER**  
\$5,000 per year for 5 years
- CONNECTING PARTNER**  
\$10,000 per year for 5 years

**I would like to contribute in other ways...**

- Contribute \$\_\_\_\_\_ a year for \_\_\_\_ years.
- Contribute \$\_\_\_\_\_ a month for \_\_\_\_ years.
- One time gift of \$\_\_\_\_\_.
- Please contact me. *I have other thoughts to share on how I'd like to support Pine Castle.*

**If you've previously made a multi-year pledge....**

- Add \_\_\_\_\_ more year(s) to my previous multi-year pledge.
- Increase my financial commitment to \$\_\_\_\_\_ for \_\_\_\_\_ year(s).
- Pay off my existing pledge and increase my pledge to \$\_\_\_\_\_ for \_\_\_\_\_ year(s).
- Pay my annual pledge amount of \$\_\_\_\_\_ today.

## STEP 2 – GIVE

- Check enclosed, payable to Pine Castle.
- Cash enclosed of \$\_\_\_\_\_.
- Please charge my credit or debit card:
  - Visa  MasterCard  American Express

Card # \_\_\_\_\_

Exp. \_\_\_\_/\_\_\_\_ Security Code \_\_\_\_\_

*(This information will be destroyed immediately after processing)*

*Please charge my credit or debit card:*

- ANNUALLY  QUARTLY  MONTHLY  ONCE

*Multi-Year Pledges will be billed in September, unless you request otherwise.*

- My company will match my gift.

## STEP 3 – JOIN

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

eMail \_\_\_\_\_

Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Contact me about touring Pine Castle**

Pine Castle's mission is to empower adults with intellectual and developmental disabilities through opportunities to *Learn, Work and Connect.*

Pine Castle, Inc. 4911 Spring Park Road, Jacksonville, FL 32207