



STEP 1: PLAN

YES, I would like to become a part of the Inspirations Society...

SUSTAINING PARTNER

- \$1,000/yr for 5 years
OR
 \$83.33/month for 5 years

First Installment ____/____

ENRICHING PARTNER

- \$5,000/yr for 5 years
OR
 \$416.67/month for 5 years

First Installment ____/____

TRANSFORMING PARTNER

- \$10,000/yr for 5 years
OR
 \$833.33/month for 5 years

First Installment ____/____

I would like to contribute in other ways...

- Give \$_____ a year for ____ years
 Give \$_____ a month for ____ months
 One-time gift of \$_____
- Please contact me. I have other thoughts to share on how I would like to support Pine Castle's mission.

STEP 2: GIVE

- Check enclosed, payable to Pine Castle.
- Please charge my credit or debit card: Visa MC AmEx Disc
Card #: _____ Exp: ____/____ CVV: _____
- My company will match my gift.

STEP 3: JOIN

Name(s): _____ Date: _____
Please state your name(s) exactly as you would like to be recognized) (If applicable)

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ Cell Phone: _____

Email: _____ Birthday(Month/Day): _____ Birthday(Month/Day): _____

Signature: _____

Contact me about touring Pine Castle

Pine Castle's mission is to empower adults with intellectual and developmental differences through opportunities to learn, work, and connect.

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