



# I SUPPORT THE SARANAC PROMISE CAMPAIGN

Name \_\_\_\_\_

Please indicate how you would like your name to appear in our print materials

Email \_\_\_\_\_ Phone (    ) \_\_\_\_\_

Address \_\_\_\_\_

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

Please accept my gift of \$ \_\_\_\_\_. I want to pay by:

This is a one-time gift

This is a multi-year pledge paid as follows:

2017: \$ \_\_\_\_\_ 2018: \$ \_\_\_\_\_ 2019: \$ \_\_\_\_\_ 2020: \$ \_\_\_\_\_

My first payment is included. Please remind me  semi-annually  annually

My employer will match this gift-my company form is enclosed

I would like to remain anonymous

**BY SUPPORTING THE SARANAC  
PROMISE CAMPAIGN, I AM  
HELPING GRADUATES:**

- Prepare for college
- Afford college
- Increase earnings potential



[www.saranac.k12.mi.us](http://www.saranac.k12.mi.us)

616.642.1400

225 South Pleasant Street, Saranac, MI 48881



## HELPING SARANAC STUDENTS ATTEND COLLEGE

My gift will be:

- Cash
- Check: Payable to: Saranac Community Schools/ Grand Rapids Community Foundation
- Select credit card type:
  - Visa       Mastercard       Discover       American Express

Name on card \_\_\_\_\_

Card number \_\_\_\_\_ Exp.date \_\_\_\_\_

Signature \_\_\_\_\_

- I would like to make a gift of stock. Please contact me.
- I would like to make this gift in honor/memory of: \_\_\_\_\_
- I would like more information about:
  - Legacy Giving     Volunteering     Donations
  - Other: \_\_\_\_\_

Gifts may also be made online at [www.saranac.k12.mi.us](http://www.saranac.k12.mi.us)

**Thank you for your support!**

All gifts are tax deductible to the extent provided by law.