



RACINE LUTHERAN

I am/we are proud and pleased to be able to d	commit a gift of \$	to Racine Lutheran High Schoo
Enclosed is \$		
The balance will be paid in installments over:	☐ 1 year ☐ 2 years ☐ 3 years	☐ Other:
Please send me pledge reminders as follows:	☐ Annually ☐ Semi-Annually ☐ ☐ Other:	☐ Quarterly ☐ Monthly
I would like to fulfill my pledge through the us	e of:	
☐ Credit Card: ☐ Mastercard	☐ VISA ☐ Discover	
Credit card #:	Expiration date:	CVV:
Name on card:		
Billing address for the credit card inv	oice:	
☐ Checks made payable to Racine Luti	neran High School	
Payments may be submitted online by visiting	g www.racinelutheran.org and click	king the Support Us tab.
This gift will be matched by	in the amou	ınt of \$
I understand that the matching gift will count	toward my/our personal gift to Raci	ne Lutheran High School.
If you wish to fulfill your commitment in full o David Burgess, Executive Director, or Krista Lor	•	• •
Name authorization (please print):		
Name(s):		
Mailing Address:		
City, State, Zip:		
Phone:		
List my/our gift (optional):		
☐ In honor of:		
☐ Please do not list my/our names, as	I/we wish to remain anonymous	
Authorizing signature:	Date:	
Once form has been completed, please fold in	thirds and mail in envelope provide	ed to:
Racine Lutheran High School, 251 Luedtke Av	enue. Racine. WI 53405	