



Summer Circle Theatre Diamond Anniversary Fund Pledge Form

I/we wish to contribute \$ _____ to support the Summer Circle Theatre Diamond Anniversary Fund.

I/we pledge the annual amount of \$ _____ to be paid over a period of ____ years (maximum five years), starting in the ____ / ____ (month/year) totaling \$ _____.

My/Our gift will be paid by:

- A check(s) payable to Michigan State University
(Please include allocation code "AE100626" on check memo line)

Send pledge reminders: (check one)

- Annually Quarterly Semi-annually

Credit card: If you wish to use a credit card to fulfill your pledge, please see attached form. Please note: reoccurring credit card payments may only be set up for quarterly or monthly charges not to exceed five years.

If you wish to make recurrent *once-annual* credit card payments, please contact Marcia LeVigne, Assistant Director of Development, at 517-884-7826 or levigne1@msu.edu to set up reminders.

This is a joint gift with my spouse/significant other: _____

This is a matching gift with my company: _____

Personal Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ Email: _____

Signature: _____ Date: _____

Please send form to:
Marcia LeVigne
479 W Circle Dr. Room 101
East Lansing MI 48824