



# FUQUA SCHOOL

P.O. Box 328 • Farmville, Virginia 23901 • (434) 392-4131

## BUILDING TOGETHER, SOARING BEYOND: CAPITAL CAMPAIGN PLEDGE AGREEMENT

Donor(s): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Yes! I believe in the mission of Fuqua School and want to support the Building Together, Soaring Beyond Capital Campaign.**

By this pledge, I/we are making a binding commitment to give the amount(s) specified below, which pledge Fuqua School accepts and will act in reliance upon to begin the building project and programs supported by the capital campaign. Any contributions received in excess of the amounts needed for the designated project will be used for future operating costs, related indebtedness, or will be used as needed at the complete discretion of the school. I/We intend that the terms of this pledge will be legally binding upon and enforceable against me/us and my/our respective successors and heirs. This pledge shall be governed by and interpreted under the laws of the State of Virginia. Donations are tax-deductible to the extent allowed by law.

**Donor Signature:**

\_\_\_\_\_  
Date: \_\_\_\_\_

**Donor Signature:**

\_\_\_\_\_  
Date: \_\_\_\_\_

### Terms of Pledge

#### Naming Rights:

- \$1M – Upper School Building
- \$500,000 – Library/US Office Space
- \$250,000 – Band/Football Locker Room
- \$125,000 – Upper School Classroom

Total Amount of Pledge: \$ \_\_\_\_\_

#### Pledge to be paid as follows:

I am supporting this campaign today with the gift of: \$ \_\_\_\_\_

Single Year Amount Of Pledge: \$ \_\_\_\_\_

Beginning on (date): \_\_\_\_\_

Multiple Year Amount Of Pledge: \$ \_\_\_\_\_

Beginning on (date): \_\_\_\_\_

To be paid over (years): \_\_\_\_\_

#### Please Remind Me:

- Annually
- Monthly
- Quarterly
- Other: \_\_\_\_\_

### Method of Payment(s)

#### Check Payable To:

*Fuqua School*

#### Please Charge My:

- Visa       MC
- AmEx       Discover

#### Credit Card Number:

\_\_\_\_\_  
Exp. Date: \_\_\_\_\_

#### Give Online At:

<https://www.fuquaschool.org/capitalcampaign>

#### Planned Gifts and Stock:

Please contact Fuqua School for more information.

#### Other:

My/Our Gift will be matched by:

- Matching Gift Enclosed
- Matching Gift Form Will Be Sent

### Public Recognition

Fuqua School may publicly acknowledge my commitment:

- Yes       No

This gift commitment is made in honor/memory of:

\_\_\_\_\_

Please send notification of my honorary/memorial gift to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Special Instructions:

\_\_\_\_\_

**Thank you for your charitable contribution.**

[www.fuquaschool.org](http://www.fuquaschool.org)

Fuqua School is a 501 (c)(3) not-for-profit organization.

Donations are tax-deductible to the extent allowed by law.



*Fuqua School admits students of any race, sex, ethnicity, religion, culture, nationality, family structure, sexual orientation, gender identity and socioeconomic background, to all the rights, privileges, programs, and activities generally accorded or made available to students at the school.*