



Oregon Robotics Tournament & Outreach Program



PLEDGE FORM

Donor Information:

Name _____

Formal Name(s) to Use in Recognition Notifications: same as above _____

Address _____

City, ST Zip Code _____

Phone & Email _____

Company _____

Pledge Information: *Multi-year pledges are encouraged for budget planning and updates to committed supporters.*

	This Year 2018-2019 (ends 6/30/19)	Next Year 2019-2020 (ends 6/30/20)	20th Anniversary Year 2020-2021 (ends 6/30/21)	
I (we) pledge: \$	\$	\$	\$	Total \$ =

This contribution is made in honor of (Full Name) or (FIRST Team Number/Name) : _____

I (we) will make payment(s) by : cash check credit card EFT Donor Advised Fund Other

Payment enclosed. Please contact me for payment information and to confirm the payment schedule options.

This gift will be matched by: a company giving campaign other _____

Use of Contribution: *Contributions over \$5,000 per year may be designated to a specific use. Gifts over \$20,000 may be restricted for a special use. These contributions will be provided a Memo of Understanding (MOU) detailing use.*

() My(our) gift is under \$5,000. Per our gift acceptance policy, all gifts under \$5,000 are directed to ORTOP's unrestricted general fund to support all FIRST programs and initiatives.

() My(our) gift is over \$5,000 per year. Please designate it for the following specific use (select one) :

County Name(s): _____

Programs : FLL Jr FLL FTC FRC All Programs

() My (our) gift is over \$20,000 per year. Please restrict it to the following use (*use backside of form for more space*) :

Signature(s):

Pledge Date: _____

Please make checks, corporate matches, or other contributions payable to:

Mail: Oregon Robotics Tournament & Outreach Program (ORTOP)
% Sarah Tenney, Director Development & Communications
4800 SW Griffith DR, Ste. 215 Beaverton, OR 97005
Email: sarah-tenney@ortop.org

