
Name

I pledge to stand with Planned Parenthood
as a member of the *Promise for Tomorrow Society*:

Visionary Circle - \$1,000 per year for five years (\$83.33/month)

Solidarity Circle - \$2,000 per year for five years (\$166.66/month)

Advisory Circle - \$5,000 per year for five years (\$416.66/month)

Signature

Date

Please charge my credit card:

My first check is enclosed made payable to PPCWNY.

Name on card

Email

Address

Please circle: Visa / MasterCard / AmEx / Discover

City, State, Zip

Card number

Phone number

Expiration date

Celebrating you

I/We would like to be listed as donors as
(please print):

Send me instructions to make my gift with stock.

Please make my gift anonymous.

I have made a gift to PPCWNY in my will.

I/we would prefer to give through a donor
advised fund.

Send me information about making a gift to PPCWNY
in my will.

Please contact me. I have thoughts to share.