



PLEDGE FORM

Donor Name(s) _____

Address _____

City, State, Zip _____

Home Phone _____ Cell Phone (name) _____

Email (name) _____

I would like my gift to remain anonymous

For acknowledgement, please list this gift from _____
(Bill Jones, William H Jones, the Jones family, etc.)

SPIRIT OF ARCADIA GIFT

Your gifts will be directed to Stage One of the Spirit of Arcadia Campaign. This includes a vital shoreline protection system and much needed building and grounds improvements.

Spirit of Arcadia Pledge:

As an investment in the Spirit of Arcadia campaign, I/we hereby agree to pay Camp Arcadia the sum of \$_____ to be paid in cash, securities, or other property of equivalent value. Pledge to be paid as follows:

Year	Amount
2018	\$
2019	\$
2020	\$

I will make my annual payment by
 check credit card from my bank account

I will make monthly payments of \$_____ by
 check credit card from my bank account

I am enclosing my one time donation to Spirit of Arcadia

I have made my donation online (with SOA in the comment section)

I will make my payments through securities or other property

Signed _____ Date _____

Signed (Joint pledges) _____ Date _____

ANNUAL CAMPAIGN GIFT

Camp Arcadia relies on your gifts to the Annual Campaign to keep Camp's registration rates affordable and allow us to continue to provide a life-changing experience for our guests. We ask that you would prayerfully consider making a gift to Camp Arcadia's Annual Campaign.

In addition to my pledge to the Spirit of Arcadia campaign, I wish to make a gift to the Annual Campaign in the amount of _____.

- I will make my annual payment by
 - check credit card from my bank account
- I will make monthly payments of \$ _____ by
 - check credit card from my bank account
- I am enclosing my one time donation to the Annual Campaign
- I have made my donation online

PAYMENT OPTIONS

If you would like to use Visa/MasterCard/Discover please fill out the information below:

Name on Credit Card _____ CVV Code _____

Credit Card Number _____ Exp. Date (mm/yy) _____

Signature _____

If you would like to use a bank account for payments please fill out the information below:

- Checking Account (Please attach a voided check to this form for clarification)
- Savings Account

Routing Number _____

Account Number _____

If you indicated above that you would like to set up recurring monthly gifts, please sign the statement below:

"I authorize Lutheran Camp Association to automatically withdraw donations/payments from my account on the 15th of each month. This authority will remain in effect until I give reasonable notification to terminate the authorization."

Signature _____

ARCADIA FOUNDATION GIFTS: BECOME A CAMP ARCADIA LEGACY BUILDER

You can become a Camp Arcadia Legacy Builder by including Camp Arcadia's ministry in your estate plans. Estate gifts can include gifts through your will, IRA, life insurance policy or a charitable trust, or even an outright gift of cash or stock.

- I/We would like to learn more about becoming a Legacy Builder.

I/We have made a provision for _____ in my/our estate plans. This gift is unrestricted (or if restricted, designated for _____).

My best estimate of the current value of this gift is \$ _____