

# 2009 Individual Pledge Form

# GIVE. ADVOCATE. VOLUNTEER. LIVE UNITED



United Way  
of Racine County

Name \_\_\_\_\_  
 Home Address \_\_\_\_\_ Apt. # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home phone ( \_\_\_\_ ) \_\_\_\_\_

Signature \_\_\_\_\_  
*Required for credit card authorization*  
 Date \_\_\_\_\_  
*I have contributed to United Way for \_\_\_\_ years.*

**Want to see how your contribution makes a difference?** Please provide your home e-mail address so we can show you how your contribution makes a difference and provides opportunities to give, advocate and volunteer all year long.

Home e-mail address \_\_\_\_\_

**Choose how you want to invest in your community:**

**INFLUENCE THE CONDITION OF ALL - United Way Community Impact**

**The most powerful way to invest your contribution.** United Way is working to advance the common good by focusing on education, income and health. These are the building blocks for a good life – a quality education that leads to a stable job, enough income to support a family through retirement and good health. **OR**

**EDUCATION** Helping children and youth achieve their potential through education - 3010

- Improving access to quality early learning opportunities
- Partnering with schools and parents to improve **graduation rates**
- Providing after-school mentoring programs for **at-risk youth**

**INCOME** Helping families become financially stable and independent - 3020

- Supporting **basic needs** while increasing financial understanding
- Helping hardworking people obtain job training and **family-sustaining wages**
- Working with families to have enough assets to be **financially stable**

**HEALTH** Improving people's health - 3030

- Increasing access to **critical health care services**
- Reducing **substance abuse, child abuse and domestic violence**
- Increasing **health education and preventive care**

## PLEDGE

My total contribution \$ \_\_\_\_\_

## WAYS TO GIVE

- Check** (Attached and payable to United Way of Racine County)
- Personal Billing** Please send my personal billing statement:  
 Monthly  Quarterly  One time Start date \_\_\_\_/\_\_\_\_/\_\_\_\_
- Credit Card** (\$50 minimum)  
 MasterCard  Visa  American Express  Discover  
 Account # \_\_\_\_\_ Exp. Date \_\_\_\_\_  
 Please charge: \_\_\_\_ Monthly \_\_\_\_ Quarterly \_\_\_\_ One time
- Stocks or Securities** For gifts of stock, real estate, electronic funds transfer and life insurance, call us at 262-898-2246.
- I would like additional information about planned giving options such as memorials, beneficiaries, gifts, trusts, or bequests.

## LEADERSHIP GIVING

### Beacon Circle Levels

Annual gift of \$1,000 or more

_____ Tocqueville	\$10,000 and up
_____ Diamond	\$ 7,500 - \$9,999
_____ Gold	\$ 5,000 - \$7,499
_____ Silver	\$ 2,500 - \$4,999
_____ Copper	\$ 1,750 - \$2,499
_____ Bronze	\$ 1,000 - \$1,749

- Please combine my gift with my spouse/partner for us to be recognized as Beacon Circle leaders.  
 Spouse's name \_\_\_\_\_  
 Spouse's employer \_\_\_\_\_
- Please list my/our name(s) as below in all recognition materials.  
 (Print clearly.) \_\_\_\_\_
- I prefer to remain anonymous.

For more information about the Beacon Circle Leadership Program, please contact Tracy Nielsen, VP of Marketing and Resource Development, at 262-898-2249.

## DESIGNATION INFORMATION

You may also designate to United Way Partner Provider organizations or programs serving western Racine County. This requires completing a separate form available through the United Way of Racine County office. **Please note that this applies only to contributions totaling \$50 or more.**

- I have completed a donor designation form.

No goods or services were given in return for this contribution. The entire contribution is tax deductible as allowed by law.

White Copy - Return to United Way • Pink Copy - Keep for tax purposes

United Way of Racine County • 2000 Domanik Drive • Racine, Wisconsin 53404 • (262) 898-2240 • www.unitedwayracine.org