



**Pledge Form for C2CR2C**  
**Carroll County Humane Society**  
 Helping to end the killing of companion animals  
 through spay/neuter & adopt.



**Donor Information (please print and complete or type and print)**

Name	
Billing address	
City	
State	
ZIP Code	
Telephone (home)	
Telephone (business)	
Fax	
E-Mail	

**Pledge Information (please complete, check, or strike out as appropriate)**

I (we) pledge a total of \$ \_\_\_\_\_ per mile cycled for \_\_\_\_\_ number of miles, to be paid:  
 (delete as appropriate) now / at the end of the ride, for a total of \$ \_\_\_\_\_.

I (we) plan to make this contribution in the form of:  
 (delete as appropriate) cash / check / credit card / other (enter method) \_\_\_\_\_

Credit card type	
Credit card number	
Expiration date	
Authorized signature	

Gift will be matched by \_\_\_\_\_ company / family / foundation  
 Form enclosed / Form will be forwarded (delete as appropriate)

**Acknowledgement Information**

Please use the following name(s) in all acknowledgements:

--

I (we) wish to have our gift remain anonymous: Yes / No (delete as appropriate)

Signature(s)
Date

**Please make checks, corporate matches, or other gifts payable to:**

**Carroll County Humane Society, P.O. Box 1304, Carrollton, GA 30112**  
**A 501(c)(3) non-profit organization – all donations are tax-deductible.**