



UUCSC Annual Pledge

For July 1, 2020 to June 30, 2021

Name/s _____

Street _____

Town _____

State _____ Zip _____

Phone _____

My/our current pledge is \$ _____ per year.

My/our new pledge is \$ _____ per year.

I will pay as follows:

Weekly \$ _____

or

Monthly \$ _____

or

Quarterly \$ _____

Signature/s _____

It is understood that the above pledge may be revised, should your circumstances change.