



# Entertain the Future!

A CAPITAL CAMPAIGN TO EXPAND & ENHANCE THE NEWPORT PERFORMING ARTS CENTER

OCCA CAPITAL CAMPAIGN – RAMONA MARTIN PIANO REHEARSAL ROOM

## PLEDGE FORM

The purpose of this Pledge Form is to memorialize the arrangement between the Donor and OCCA, to receive Donor’s contribution to the **RAMONA MARTIN PIANO REHEARSAL ROOM** including the terms under which the donation made, the time frame within which the pledge is completed, and information regarding the recognition of the Donor for purposes of an acknowledgement.

Name(s): \_\_\_\_\_

In support of the Oregon Coast Council for the Arts (OCCA) – **RAMONA MARTIN PIANO REHEARSAL ROOM** *Entertain the Future!* Capital Campaign, I wish to contribute the sum of \$\_\_\_\_\_.

Please make checks payable to the **OCCA – RAMONA MARTIN ROOM**

Please accept the following terms of my Pledge:

Total Amount Pledged: \$\_\_\_\_\_ ; Paid Herewith \$\_\_\_\_\_ ; Balance \$\_\_\_\_\_

Paid as follows: 2018 \$\_\_\_\_\_ ; 2019 \$\_\_\_\_\_ Date Payment to start:\_\_\_\_\_

Terms of Payment:\_\_\_\_\_

I wish to charge \$\_\_\_\_\_ of my pledge to:

AMEX;             Discover Card;             Master Card;             VISA

Card Number:\_\_\_\_\_ Expiration Date:\_\_\_\_\_ CVC:\_\_\_\_\_

Name as it appears on card:\_\_\_\_\_

For acknowledgement, please list my name(s) as follows:

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City:\_\_\_\_\_ State:\_\_\_\_\_ Zip:\_\_\_\_\_ Phone:\_\_\_\_\_

Email address: \_\_\_\_\_

Signature(s): \_\_\_\_\_

*Oregon Coast Council for the Arts is a 501(c)(3) nonprofit organization, Tax ID#93-0696250.  
Your gift will be acknowledged upon receipt of your donation. Thank you!*