



Rocky Mountain  
**RAPTOR**  
Program  
*a second chance at freedom*

# My Pledge

Thank you for your interest in giving a recurring pledge to the Rocky Mountain Raptor Program! Please fill out this form so we can make sure you receive the recognition you deserve.

## Your Information

Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Gift Information

### I would like this recurring gift to be:

**Monthly—Join the 1987 Club!**  
A giving club honored  
with exciting opportunities.

**Quarterly**  
 **Semi-annually**  
 **Yearly**

Donors who give a cumulative total of \$1000+ annually become a part of the Aerie Society, a cornerstone giving community honored with exceptional benefits.

### Select Amount:

\$10                       \$500  
 \$25                       \$1000  
 \$50                         Other: \$ \_\_\_\_\_  
 \$100

Donation Start Date: \_\_\_\_\_

As soon as possible

## Payment Information

**Please Charge My Credit Card:**  
 Visa     MasterCard     Discover

Name on Card: \_\_\_\_\_

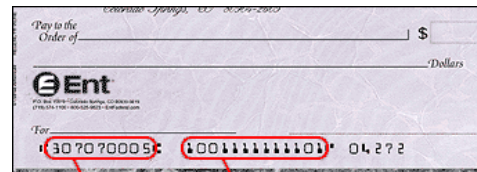
Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

Security Code: \_\_\_\_\_

Signature: \_\_\_\_\_

Please note: Monthly donations are receipted at the end of year. If you need a monthly receipt for your donation, please check here:



Routing number

Account number

**Please Charge My Bank Account (Electronic Funds Transfer):**

Name on Account: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Signature: \_\_\_\_\_

### Mailing Address:

Rocky Mountain Raptor Program  
2519 S. Shields Street, #115  
Fort Collins, CO 80526

### Contact:

Phone: (970) 484-7756  
Email: [info@rmrp.org](mailto:info@rmrp.org)  
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