



## Ele's Place Ann Arbor Healing Hearts Society 2022 Pledge Form

### I/We would like to become a Member of the Healing Hearts Society Today

- \_\_\_\_ **Gift of Hope:** \$1,000 annually for 3 years - OR - \$83.33 monthly for 36 months \*
- \_\_\_\_ **Gift of Compassion:** \$2,500 annually for 3 years - OR - \$208.33 monthly for 36 months \*
- \_\_\_\_ **Gift of Friendship:** \$5,000 annually for 3 years - OR - \$416.66 monthly for 36 months \*
- \_\_\_\_ **Gift of Love:** \$10,000 annually for 3 years - OR - \$833.33 monthly for 36 months \*

- OR -

(Please circle annually or monthly)

\_\_\_\_ I/We would prefer to make a **one-time gift** in the amount of \$ \_\_\_\_\_

\_\_\_\_ I/We would prefer to make a **recurring gift** in the amount of \$ \_\_\_\_\_ to be paid  
annually - OR - monthly with an **End Date** of \_\_\_\_\_ (Optional) \*

(Please circle annually or monthly)

*Each donation of \$600 provides a child or teen peer grief support for one year. Donations of any amount are welcome and appreciated.*

### Method of Payment Information:

\_\_\_\_ My/Our check is enclosed, made payable to: **Ele's Place Ann Arbor** Ck # \_\_\_\_\_

\_\_\_\_ Please charge my/our credit card. Card # \_\_\_\_\_ Exp. \_\_\_\_\_ Code: \_\_\_\_\_

\_\_\_\_ Please contact me/us. I would like to pay my pledge with a gift of stock, from my IRA account or donor  
advised fund. \_\_\_\_\_

Preferred Contact Phone Number

Best Day/Time to Contact You

\_\_\_\_ My/Our company will match my gift. Company Name: \_\_\_\_\_  
(Please ask your employer if they have a matching gift program.)

\_\_\_\_ Please contact me/us so I/we can learn how to leave a legacy and help future generations of grieving  
children and teens through my will or estate plan. \_\_\_\_\_  
Preferred Contact Phone Number Best Day/Time to Contact You

\* After your initial monthly gift, recurring monthly gifts will be charged to your credit card on file on the 22nd of each month thereafter.

\* Annual gift reminders will be sent to donors with information on how to pay on-line or by check.

### Billing Information:

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

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

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

Primary Phone Number : \_\_\_\_\_ Employer: \_\_\_\_\_  
Home/Cell (Please circle one)

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

\_\_\_\_ I/We would like to be recognized as "Anonymous" donors

Ele's Place Ann Arbor  
5665 Hines Drive, Ann Arbor, MI 48108 · (734) 929-6640 · [www.elesplace.org](http://www.elesplace.org)  
Ele's Place is a 501(c)(3) tax-exempt nonprofit organization.

