



## PARKE TRAILS ALLIANCE - NEXT LEVEL TRAILS GRANT COMMITMENT AND DONATION FORM

### CONTACT INFORMATION

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

### COMMITMENT FOR NEXT LEVEL TRAILS GRANT (CONTINGENT UPON BEING AWARDED GRANT)

\_\_\_ I AM COMMITTING \$ \_\_\_ PER YEAR FOR \_\_\_ YEARS, FOR A TOTAL OF \$ \_\_\_\_.

\_\_\_ ONE-TIME DONATION / COMMITMENT OF \$ \_\_\_\_.

### PAYMENT INSTRUCTIONS

\_\_\_ PLEASE CHARGE MY CREDIT CARD \_\_\_ VISA \_\_\_ MASTERCARD \_\_\_ AMEX \_\_\_ DISCOVER

CREDIT CARD # \_\_\_\_\_ EXPIRES \_\_\_\_\_ CVV CODE \_\_\_\_\_

\_\_\_ CHECK ENCLOSED (PAYABLE TO PARKE TRAILS ALLIANCE, MAIL TO: PO BOX 3 ROCKVILLE, IN 47872)

\_\_\_ IN-KIND CONTRIBUTIONS, VOLUNTEER HOURS, MACHINERY AND SERVICES.

### CONFIRMATION

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_



BECOME A PTA INSIDER BY JOINING OUR MAILING LIST TO RECEIVE PERIODIC UPDATES, UPCOMING EVENTS, AND PTA NEWS. PLEASE CHECK THE BOX BELOW. YOU CAN UNSUBSCRIBE AT ANY TIME.