CAMP DISCOVERY CAMPAIGN

Commitment Form

I/We are proud to support the work of the Collier County Junior Deputies League. Count Me/Us in to complete Camp Discovery!

I/We wish to Reserve the Following Naming Opportunity

Recognition for this donation should be noted as follows: _

This gift is in honor/memory of and recognition should be noted as follows:

I/We do not wish to reserve a naming opportunity, please count me/us in for a donation of $_$

PLEASE NOTE PAYMENT PREFERENCES

- \Box My/Our check made payable to the CCJDL is enclosed
- \Box I/We will transfer securities please contact me directly.

 \Box Donations can also be charged at www.juniordeputies.com/membership by securely clicking on the PayPal link.

Please Print Name On Card		Card Number		Expiration Date
	CVV Code			0
This is a One-time Donation				
□ This is a Three-Year Pledge to be	made in payments beginning _		and ending	
□ My/Our gift will be matched by: _	(Please Print Co	ompany Name)	please co	ntact me for details
CONTACT INFORMATION			E.S.	
Name(s)				
Winter Address				
Winter Address Summer Address				

□ Please send information on leaving a legacy gift to the CCJDL.

Thank You For Your Support!

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