

the PROMISE campaign



A commitment to invest in a child's most critical years

You are asked to fill out this Promise Form to
officially designate your Campaign gift to
PACT: Helping Children with Special Needs.

Name _____

Address _____

City _____

State _____ Zip _____

Phone (H) _____

(W) _____

(C) _____

Email _____

We/I hereby pledge our/my gift of \$ _____

to be paid in installments of \$ _____

over a period of _____ years on

_____ (month/day) of _____ (years)

Signature _____

Date _____

**Donations and pledge payments can be made on-line
at www.PACT.kennedykrieger.org**

On behalf of PACT's Board, staff and the many families we
serve, **THANK YOU** for your generous contribution.

For information regarding your donation, please contact
the Development Office at **(410) 298-7000 x41928**, or
at choiap@kennedykrieger.org.