

THE CAMPAIGN FOR
**GOLDEN GATE PARK
 TENNIS CENTER**



I/We are pleased to support the Campaign for
 Golden Gate Park Tennis Center and pledge a gift totaling:

\$ _____

Printed Name _____

Signature _____ Date _____

Address _____

Home/Work Phone _____ Cell Phone _____ email _____

Payment Schedule

Please indicate your preferred pledge payment schedule below. We request you pay your pledge in full by September 2020.

<u>Pledge Payment Amount</u>	<u>Month</u>	<u>Year</u>

Additional Comments: _____

In all donor recognition materials, please acknowledge me/us as

I/We wish to remain anonymous

I/We are interested in a naming/recognition opportunity. Please contact me to discuss the opportunities available.

Please complete and return this form to:
 Paula Martin, Development Operations Manager
 San Francisco Parks Alliance
 1074 Folsom Street, San Francisco, CA 94103
[paula@sfparksalliance.org](mailto:Paula@sfparksalliance.org)

(415) 801-4155

