



**NORTHWEST FLORIDA
STATE COLLEGE
FOUNDATION**

Foundation Director

Annual Giving Pledge Form 2024-2025

Name: _____

As a Foundation Board Member I have a crucial role to play in raising funds for NWFSC.

I will participate in the following way(s) this year:

| | |
|---|----------|
| __ President's Circle (minimum \$500 unrestricted gift) | \$ _____ |
| __ First Generation Scholarship | \$ _____ |
| __ NFSO Support | \$ _____ |
| __ Other Designation (_____) | \$ _____ |
| TOTAL | \$ _____ |

__ In addition to my personal gift, I will encourage my company to also give a gift

For my gift I would prefer to make:

- One payment
- Quarterly payments
- Monthly payments

__ My company will match my donation (I will submit the matching gift form with my payment(s)).

Please make gift or first pledge payment by July 31st, so we can start the year with 100% participation.

I understand that my financial commitment and participation is an expectation of Board membership.

Board Member Signature

Date