



Pledge Form

FREDERICK DOUGLASS

FOUNDATION OF CALIFORNIA

We Believe in Religious Freedom, the Sanctity of Human Life and the Protection of Traditional Marriage. The Frederick Douglass Foundation encourages anyone to apply for membership. We do not discriminate based on gender, race, class, economic status, ethnic background, sexual orientation, age, physical ability, cultural and religious backgrounds.

Donor Information (please print or type)

Name	
Billing Address	
City	
State	
ZIP Code	
Billing Telephone	
E-Mail	

Pledge Instructions (\$30 minimum for monthly donations)

I (we) plan to make this contribution in the form of: ☐ cash ☐ check ☐ credit card ☐ other.

I (we) pledge a total of \$_____ to be paid: ☐ one-time ☐ monthly ☐ quarterly ☐ yearly.

Name (as it appears on credit card)	
Credit Card Type	
Credit Card Number	
Expiration Date	
Security Code	
Authorized Signature:	

Automatic Bank Transfer

☐ I have enclosed a check for my first monthly contribution. Please make check payable to the "Frederick Douglass Foundation of California". Automatic bank transfers will begin the following month.

Authorized Signature:	
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