



ASLA
ILLINOIS

Advocacy Campaign Pledge Form

Donor Information (please print or use fillable form)

Name

Billing address

City, ST Zip Code

Phone 1 | Phone 2

Fax | Email

Pledge Information

I (we) pledge a TOTAL of \$

I (we) plan to pay: now monthly quarterly other

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

Credit card number

Credit card expiration date / code / zip code

Authorized signature

Gift will be matched by (company/family/foundation) form enclosed form will be forwarded

Acknowledgement Information

Please use the following name(s) in all acknowledgements:

I (we) wish to have our gift remain anonymous.

Signature(s)

Date

Please make checks, corporate matches,
or other gifts payable to:

Illinois Chapter, American Society of Landscape
Architects
P.O. Box 4566
Oak Brook, IL 60522

Donations to lobbying efforts are not tax exempt. Consult with your tax advisor for more information.