

Pledge Form for Thompson Hall Elevator/Renovation Project

Complete this form if you wish to donate to Charles Thompson Memorial Hall Renovation & Elevator Project. By completing this form, you are authorizing to have a direct payment from your bank account (checking or saving) into an account that is specifically for the renovation and elevator project. The MN Deaf Club Renovation & Elevator Project Account is set up at Hiawatha National Bank in Hudson, Wisconsin, a deaf-owned bank. The funds donated will only be used for the project and be monitored by both the Board of Trustees at Thompson Hall and Deaf Equity Board. When funds are withdrawn from the account to pay for project expenses; both presidents, Herman Fuechtmann of Thompson Hall and Darlene Zangara of Deaf Equity are required to co-sign the check.

If you have any questions or concerns, please contact us at savethdeafclub@gmail.com. Thank you for your support!

Your name: _____

Email address: _____

Donation (check one):

____ Monthly donation

____ Bi-weekly donation (every other Friday)

____ Bi-weekly donation (on the 15th and 30th of the month)

____ One-time donation (checks can be written out to: MN Deaf Club Renovation & Elevator Project)

Amount? (check one)

____ \$5.00

____ \$10.00

____ \$20.00

____ \$50.00

____ \$100.00

____ other

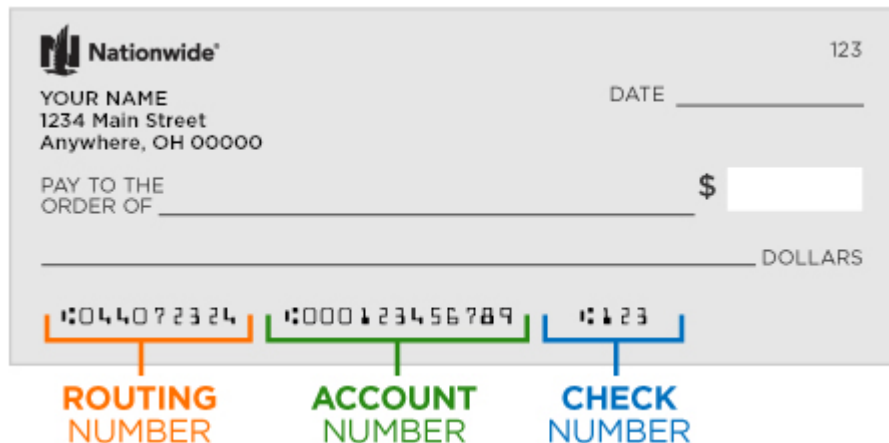
Bank name and address on next page (credit cards are not accepted at this time).

***If you wish to use a credit card, please use the GoFundMe account - Save Thompson Hall**

_____ **Bank name**

_____ **Bank address**

Which account for direct payment? _____ Checking Account _____ Savings Account



Routing number: _____

Account number: _____

Date of the month to withdraw funds from your bank account: _____

End date for your donation: _____ *If no end date is given, then the direct payments will continue until MN Deaf Club and Hiawatha Bank have received written notification of termination (end) of the payments with at least two weeks notice for the process to be completed in a reasonable amount of time.

_____ I authorize Hiawatha National Bank, called HNB to withdraw from my bank account to make a direct payment into the MN Deaf Club Renovation & Elevator Project (account #502930).

_____ **signature**

Thank you for your donation. Contact us at anytime at savethdeafclub@gmail.com if you wish to change your donation. Your donation is tax-deductible. We will send you an email with a receipt of your donation for the year in January for tax purposes. Pledge forms can be dropped off at the Deaf Club or mailed:

MN Deaf Club Elevator/Renovation Project
1824 Marshall Avenue
Suite #1
Saint Paul, MN 55104