

**Giving While Living Pledge Form**

Thank you for your commitment to the Madison South Rotary Foundation. To better understand your intentions of this gift, we ask that you please complete this form with as much detail as you are comfortable sharing. The information you provide is not legally binding and we understand you may wish to change your gift in the future. Questions? Please contact any current Foundation Board member.

**Please return completed form to:**

Madison South Rotary Foundation, PO Box 259672, Madison, WI 53725

**Madison South Rotary Foundation Tax ID: 39-1342489**

**Contact Information:**

**Name(s):** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Home/Cell Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**About Your Gift:**

I/we are supporting the Madison South Rotary Foundation with a gift totaling  
\$ \_\_\_\_\_ which will be made payable to the  
Madison South Rotary Foundation. Please choose one of the following:

A one-time donation: \_\_\_\_ A multi-year pledge: \_\_\_\_1 year \_\_\_\_2 yrs, \_\_\_\_3 yrs, \_\_\_\_4 yrs, \_\_\_\_5 yrs

**Acknowledgement of Your Gift:**

The MSRF would like to acknowledge your gift in our annual report (the dollar value of your gift will remain confidential). Please chose one of the following:

☐ Please list my/our names as: \_\_\_\_\_

☐ Please do not list our names in the annual report.

**Signatures:**

\_\_\_\_\_ **Date:** \_\_\_\_\_

\_\_\_\_\_ **Date:** \_\_\_\_\_