COMMITMENT FORM



Your financial support helps KCSL fulfill its mission to protect and promote the well-being of children. Please complete this form in print to confirm your pledge.

KCSL HOPE FOR CHILDREN CIRCLE

MULTI-YEAR GIFTS WITH MULTI-YEAR IMPACT				
	5 YEAR COMMITMENT	ANNUAL INSTALLMENTS		
□ Empower Lives	\$50,000	\$10,000/year		
□ Strengthen a Family	\$25,000	\$5,000/year		
□ Prevent the Hurt	\$5,000	\$1,000/year		

ANNUAL GIFTS

Your pledge for one year can be paid in a lump sum or in monthly installments. Please indicate the level, your preference for either a lump sum or monthly installment, and the amount of that gift.

ANNUAL DONOR LEVELS			
LEVEL	1 YEAR COMMITMENT	ONE-TIME GIFT	MONTHLY INSTALLMENT
□ Champions	\$20,000+	\$	\$
□ Investors	\$10,000-\$19,999	\$	\$
□ Leaders	\$5,000-\$9,999	\$	\$
□ Guardians	\$2,500-\$4,999	\$	\$
□ Patrons	\$1,000-\$2,499	\$	\$
□ Friends	\$500-\$999	\$	\$
□ Advocates	\$250-\$499	\$	\$
□ Other	Under \$250	\$	\$

OTHER WAYS TO CONTRIBUTE

- □ Please contact me about planned giving.
- □ Please contact me about tax-advantaged giving.
- □ Please contact me. I have other thoughts to share about how I can help.
- □ I have a Donor Designated Fund at: _

DONOR INFORMATION

Date

Name

Spouse/Partner

Address

City

Zip

State

Preferred Phone Number

Preferred Time to Call

Email

PAYMENT

- My cash/check is enclosed. (Please make checks payable to Kansas Children's Service League.)
- □ Please charge my VISA/MC credit card

Credit Card #

Exp.

Name on Credit Card

CSV #

Your Signature

- Please contact me about how I prefer to pay (e.g., bank account or other).
- □ My company, _____ will match my gift.

Contact person

Phone

Your gift helps create transformational change. Thank you for your financial support!

QUESTIONS?

Contact Jeremy Kindy at jkindy@kcsl.org or 316.942.4261 x1371.



