



# Pledge Form for 2016

## Dance in the Rain Whole Person Approach

“To inspire peer to peer mental health empowerment through community based programs and engagement. Fostering self-advocacy sustaining inner equanimity and achieving wholeness while living our lives with mental illness.” –Mission Statement-

### Donor Information (please print or type)

Name \_\_\_\_\_  
Billing address \_\_\_\_\_  
City, State, Zip Code \_\_\_\_\_  
Phone 1 | Phone 2 \_\_\_\_\_  
Fax | Email \_\_\_\_\_

### Pledge Information

I (we) pledge a total of \$\_\_\_\_\_ to be paid: now monthly quarterly yearly.

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

Credit card type | Exp. date \_\_\_\_\_

Credit card number \_\_\_\_\_

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)

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

\*When funds are mailed to Dance in the Rain we feel that it's safer to mail them to Mary's home address since our office is located in an office building sometimes the mail goes to the wrong Office.\*

### Date

**Dance in the Rain Whole Person Approach  
C/O Mary E. Munsell  
145 Barnstable Rd.  
Hyannis, MA 02601**

**We are an official 501 (c) 3 organization so your  
pledge is tax detectable.**