

# Pledge Form



## Dance in the Rain Peer to Peer Mental Health

Dance in the Rain believes that peer to peer mental health support is a collaboration between peers, developing outreach and prevention programs that reinforce peer engagement and self-empowerment. It is essential that our programs grow organically from peers who seek to rebuild their lives and face the challenges living with a mental illness.

### Donor Information (please print or type)

Name \_\_\_\_\_

Billing address \_\_\_\_\_

City, ST 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)

Date

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

Dance in the Rain Peer to Peer Mental Health  
145 Barnstable Rd  
Hyannis, MA 02601