



# Pledge Form

Camp UniStar  
Capital Campaign

*Please print clearly*

Name(s) \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ E-mail \_\_\_\_\_

In support of the three-year Capital Campaign (2006-2009) I/we pledge to give a total of \$\_\_\_\_\_ payable by June 30, 2009.

The pledge will be paid in the following amounts:

2006: \$\_\_\_\_\_ 2007: \$\_\_\_\_\_ 2008: \$\_\_\_\_\_ 2009: \$\_\_\_\_\_

These payments will be made:

- \_\_\_\_ Monthly
- \_\_\_\_ Quarterly (October 1, January 1, April 1, July 1)
- \_\_\_\_ Annually (December)

I am/we are interested in making electronic debit payments: Yes / No

If you are making a direct payment now, please make your check payable to Camp UniStar.

Special instructions or variations from year to year?

\_\_\_\_\_  
\_\_\_\_\_

- \_\_\_\_ Please contact me about making my gift using stock or other assets.
- \_\_\_\_ Please contact me about putting UniStar in my will.

I/we understand that this pledge is in addition to my/our support of the annual operating budget of Camp UniStar. If circumstances change, this pledge may be revised or the timing of the payments rescheduled by contacting: Mike Schwab at 218-335-2692 (during camp season, May - October) or 651-222-4571.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please mail to:**

Camp UniStar Capital Campaign  
c/o Susan Elliott-Bryan  
1801 Blake Blvd SE  
Cedar Rapids, IA 52403-2229