



Pledge Form

Name of SDJGA Member: _____

Name of Donor: _____

Street Address: _____

City: _____ State: _____ Zip code: _____

Phone Number: _____ E-mail: _____

Pledge amount for:

Par: _____ Birdie: _____ Eagle: _____ Ace: _____

Signature: _____ Date: _____

*Email updates will be sent monthly, collection letters will be mailed or emailed in August 2010.



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