



322 Landry Drive
Kings Mountain, NC 28086

(704) 460-3433
KMECTrailblazers@live.com

Donor Information (please print clearly and exactly as you wish to be acknowledged)

Name _____

Business Name (If Applicable) _____

Street Address _____

City/State/Zip _____

Phone: _____ Email: _____

**Specify your
pledge level:**

- | | |
|---|--|
| <input type="checkbox"/> Elite Extreme Level: \$100,000+ | <input type="checkbox"/> Elite Level - \$50,000 - \$99,999 |
| <input type="checkbox"/> Platinum Level - \$25,000 - \$49,999 | <input type="checkbox"/> Gold Level - \$10,000 - \$24,999 |
| <input type="checkbox"/> Silver Level - \$5,000 - \$9,999 | <input type="checkbox"/> Bronze Level - \$1,000 - \$4,999 |
| <input type="checkbox"/> #WeAllWeGot Level - \$100 - \$999 | |

Please select your payment option below:

- ☐ **Option 1: Enclosed Contribution**
Enclosed is my gift contribution of \$_____ payable to K.M. Elite Building Fund.
- ☐ **Option 2: Automatic Bank Draft (Monthly Pledge)** I authorize the Bank of the Ozarks to withdraw a monthly contribution from my account for the next 3 years.

Date Begin Draft: ____/____/____ Annual Amount: \$_____

Select Monthly Processing Date: ☐ 1st of Every Month
(Please attach a voided check) ☐ 15th of Every Month

Signature _____ Date: ____/____/____