

# Broad Ripple High School Scholarship Foundation INC.



## 2026 Donation Pledge Form

### Donor Information (please print or type)

Name \_\_\_\_\_  
Billing address \_\_\_\_\_  
City, ST Zip Code \_\_\_\_\_  
Phone1 | Phone2 \_\_\_\_\_  
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 \_\_\_\_\_

form enclosed  form will be forwarded to: [Info@brhsscholarshipfund.org](mailto:Info@brhsscholarshipfund.org)

### 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:

Payable via our website:  
[www.brhsscholarshipfund.org](http://www.brhsscholarshipfund.org)  
(PayPal Button)

**Broad Ripple High School Scholarship  
Foundation INC.  
P. O. Box 55994  
Indianapolis, IN 46205-0094**

\*Tax exempt receipt upon donation\*