Broad Ripple High School Scholarship Foundation INC.

2025 Donation Pledge Form

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 _____

☐ form enclosed☐form will be forwarded to: 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:

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

Payable via our website:
www.brhsscholarshipfund.org
(PayPal Button)

Tax exempt receipt upon donation

Coffin Golf Course
Indianapolis, IN
June 2, 2025

Sponsor a hole:
$150 Minimal

Payable via our website: https://www.brhsscholarshipfund.org (donation button)

To sponsor a hole email your logo to: Info@brhsscholarshipfund.org