



Vision to Reality...Lowell Showboat VI

I/we agree to pledge

a total of \$_____ to support the City of Lowell Vision to Reality...Lowell Showboat VI Campaign

My/our pledge:

- Is enclosed
- Will be paid in _____ equal installments* Monthly Quarterly or Annually, beginning _____

**Reminder requests will be sent based on installment date*

- I/we wish for gift to remain anonymous

Payment Method

- Check/Money Order

Address

Phone (primary)

Cell

Email

Signature

Date

Name(s) *Print as You wish to be acknowledged:*

Please make checks payable to:

Greater Lowell Chamber Foundation
113 Riverwalk Plaza, PO Box 224
Lowell, MI 49331