



Oliver Hazard Perry Pledge Form

Yes, I want to help build the *Oliver Hazard Perry* sail training ship!

DONOR INFORMATION

Last Name _____ First Name _____ Middle Initial _____

Street Address _____

Town/City _____ State _____ Zip _____

Home Phone _____ Business Phone _____

E-mail Address _____ Fax _____

I/WE WILL SUPPORT THE OLIVER HAZARD PERRY PROJECT AS:

A **Shipbuilding Syndicate Member** at the following level of support: \$250,000 \$100,000 \$50,000 \$25,000

A **Plank Owner** at the following level of support: \$10,000 \$5,000 \$2,500 \$1,000

PLEDGE INFORMATION

I/We pledge a total contribution of \$ _____ Amount enclosed \$ _____

I/We plan to make this contribution in the form of Cash Check Credit Card Securities

Other (please specify) _____

I/We wish to have this donation spread over _____ year period (please specify 1 to 5)

Credit card type: Mastercard Visa Expiration date _____ CDC# _____

Account number _____ Name on card _____

Authorized Signature _____

Contribution will be matched by (company/family/foundation) _____

Matching gift form enclosed Matching gift form will be forwarded

ACKNOWLEDGEMENT INFORMATION

I/We wish to be recognized publicly as _____ Please include name on OHP website. ✓

I/We wish to have our contribution remain anonymous.

Signature _____ Date _____

Please make check, corporate matches or other contributions payable to: Tall Ships Rhode Island

Mail to: TSRI, 49B Bowen's Wharf, Newport, RI 02840

tallshippersrhodeisland.org

Thank you for your generous support.