

Underground of Good

COMMUNITY
FOUNDATION



Yes! I want to join the Underground of Good!

**I hereby make the following financial pledge*
to the Community Foundation's Underground of Good Fund:**

\$ _____ annually for _____ years

(Annual participation is a minimum of \$500/year per individual member)

Payment instructions:

☐

I paid with my credit card [online](#):
*Can be set up as recurring monthly (\$42), quarterly (\$125),
or annual (\$500) payments when paid online.*

☐

My first payment is enclosed. (Check made payable to: Capital Region Community Foundation)

☐

My company will match my gift. Company name: _____

Please list my/our name(s) as follows: _____

Address _____

City _____ State _____ ZIP _____

Day phone _____ Evening phone _____

Email address _____

Signature _____ Date _____

Capital Region Community Foundation
330 Marshall St., Suite 300, Lansing, MI 48912 • (517) 272-2870 • www.ourcommunity.org

**this is a statement of intent and is not legally binding*