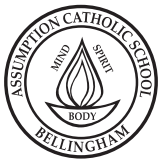


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Yes! I would like to be a part of the
Support for a Century Appeal



Assumption Catholic School

2116 Cornwall Avenue,
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*Excellence in body, mind,
and spirit since 1913.*

Full Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

Amount of my pledge: \$ _____ (one time gift)

My contribution is: Enclosed in full Bill me in _____ for full amount Bill me monthly, for # _____ payments
(month for billing)

Enclosed is a check in the above amount,
payable to *Assumption Catholic School*

Please charge my contribution
in the above amount to my:

Visa Master Card American Express

Name _____
as it appears on the card

Account # _____

Exp Date _____ 3-digit Validation Code _____
4-digit for AmEx

Signature _____ **Thank you!**

Outside envelope flap. (Do not print)

PLACE
STAMP
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