

Holmdene Historical Society Pledge Card

NAME _____

ADDRESS _____ E-MAIL _____

CITY _____ STATE _____ ZIP _____

PHONE: HOME (____) _____ WORK (____) _____

SPECIAL INSTRUCTIONS _____ MAJOR CREDIT CARD NUMBER: _____

GIFT AMOUNT \$ _____

EXPIRATION DATE _____ SECURITY CODE _____

AMOUNT PLEDGED \$ _____

*I would like information about making a gift to this endowment
through my... Will Trust Insurance*

Holmdene Historical Society

Aquinas College

1607 Robinson Road SE

Grand Rapids, MI 49506-1799

www.aquinas.edu

_____/_____
SIGNATURE DATE