

Trinity School: Annual Giving 2023 – 2024 Pledge Form

Name:			
Address:			
City:	State:	Zip Code:	
Telephone Number:			
E-Mail:			
I would like to pledge the an Annual Giving Fund.	nount of \$	to the Trinit	ty School
I will pay this amount o	n or hefore lune 15, 202	Λ	
I will pay this amount in			ears 3 years
I will pay this amount _			
	year all unrestricted gift	ts support: Faculty Salaries (and Professional
Development, Tuition Assista			CTEN 4
Restricted Fund to be u			
Tuition Assista		_Field TripsFacilities	Спареі
*If applicable, please fill in t	he below recognition info	ormation.	
*This donation is (circle one)	<u>in memory of</u> or <u>in hono</u>	or of	
Signature:		Date:	
Please complete this form an	d either email to jprice@	<u>Otrinityschoolmd.org</u> or sen	id via USPS mail to:
	Trinity School Develo	pment Office	
	4985 Ilcheste	r Road	
	Ellicott City, Mary	land 21043	

Questions: Please call #443.498.5047

Trinity School is a Maryland 501(c)3 non-profit corporation. Federal Tax ID: 52-0936008.

No good or services were exchanged for this donation.

Thank you for sharing your blessings with Trinity School.