



Ridgefield Library

472 Main Street Ridgefield, CT 06877 (203) 438-2282

Guardian Society Donation Form

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Name(s) as you would like to be recognized: _____

I would like my gift to be anonymous.

Contributions will be acknowledged as follows :

- Chairman's Circle \$10,000 and above
- President's Circle \$5,000 - 9,999
- Director's Circle \$2,500 - 4,999
- Benefactor's Circle \$1,000 - 2,499

- Here is my check in the amount of \$ _____ made payable to "The Ridgefield Library."
- Please make a one-time charge of \$ _____ to my credit card (card information below).
- I wish to fulfill my commitment with a gift of stock. Please contact me with transmittal instructions.
- The remainder of my commitment will be fulfilled through a matching gift in the amount of: \$ _____ from _____.

I wish to fulfill my commitment in _____ installment(s) of \$ _____ to be paid starting on ___/___/_____.

Frequency of installments: one-time monthly quarterly other _____

I will pay installments by check. Please send me reminder notices.

Please charge installments to my credit card as below.

Mastercard Visa Discover American Express

Credit Card # _____ Expiration Date ___/___

Security code _____

Cardholder Signature: _____

Print name as it appears on card: _____

Please print out and complete form and mail with payment to:
Ridgefield Library Association 472 Main Street Ridgefield, CT 06877
ATT: Guardian Society