

# Pledge Form



## Bill Laston Memorial Park Expansion Committee

Funds received will go to the purchase of property to expand the Bill Laston Memorial Park and any excess funds will be used solely in the development of the Bill Laston Memorial Park.

### Donor Information (please print or type)

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip Code \_\_\_\_\_  
Telephone \_\_\_\_\_  
Email \_\_\_\_\_

### Pledge Information

I (we) pledge a total of \$\_\_\_\_\_.

I (we) plan to make this contribution in the form of: cash check other.

Gift will be matched by (company/family/foundation) \_\_\_\_\_

form enclosed form will be forwarded.

### Acknowledgement Information

Please use the following name(s) in all acknowledgements: \_\_\_\_\_

I (we) wish to have our gift remain anonymous.

Signature(s)

Date

Please make checks, corporate matches,  
or other gifts payable to:

**TOWN OF LANESBOROUGH**

**[PLEASE INCLUDE THIS PLEDGE FORM  
WITH YOUR DONATION]**

Bill Laston Memorial Park Expansion  
Committee  
Lanesborough Town Hall  
83 North Main Street  
P. O. Box 1492  
Lanesborough, MA 01237