

BELIEVE GREATER DALTON PLEDGE FORM

2023-2027 initiatives investment

Company:
Contact:
Address:
City:
State:
Zip:
Telephone:
Email:

PLEDGE DETAILS:

I/We pledge a total of \$ _____ to be paid as follows:

Paid in Full _____ Date

Annually beginning _____ Date;

Please indicate preferred investment month _____ over the five-year pledge period (2023-2027).

Total pledge \$ _____ to be paid as follows: _____

Credit Card #: _____ Billing Zip: _____

Expiration: _____ Name on Card: _____ CVV: _____

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

Signature(s): _____ Date: _____

PAYMENTS SHOULD BE MAILED TO:

Believe Greater Dalton / Greater Dalton Chamber of Commerce
100 S. Hamilton Street
Dalton, GA 30720
706.278.7373

Please make all checks payable to Believe Greater Dalton.