

## 2024-2025 INSPIRE FUND PLEDGE FORM

You may use this form to make a pledge in support of the school. For assistance making a contribution, please complete this form or contact Amber Smith at <u>ASmith@mymwa.org</u> or call (317) 843-9500. Whether you elect to make a one-time gift or set up a recurring gift over the course of the year, we would be happy to assist you.

Donor Informa	tion					
Name .		Organiza	tion (if applicable) _			
Address		City		State	Zip	
Phone		Email:				
Please check all	that apply: $\square$ Cu	rrent Parent	Alumni Parent 🗆 Gr	andparent [	☐ Faculty/Staff	
□Foundation	Business	□Trustee	☐Board Member	Alumn	us/a Class of	
Pledge Informa Check one belo						
☐ Enclosed is a ☐ I/we pledge ☐ This gift if ☐ This gift is a	\$ to t in honor/memory	he Inspire Fund.	re Fund. ( <i>Check is ma</i>	de payable t	o Midwest Academy,	
Matching Gift 1	Information					
☐ In addition to my gift/pledge, my employer Please obtain forms from your employer and submit			omit with your gift.	will match my gift. ft.		
Donor Signatu	ire(s)					
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			rganization. All gifts ma tax returns to the exteni			

Thank you for investing in Midwest Academy. Your support and generosity provides

opportunity and hope for our future.