



Name _____
Address _____
City _____ State _____ Zip _____
Phone _____
Email _____

I/We support the LCS Building a Legacy Capital Campaign and commit to giving the following amounts:

- Frequency:**
- | | | |
|---|------------------------------------|--------------------------------|
| <input type="checkbox"/> 2022 \$ _____ | <input type="checkbox"/> Annually | <input type="checkbox"/> Other |
| <input type="checkbox"/> 2023 \$ _____ | <input type="checkbox"/> Quarterly | |
| <input type="checkbox"/> 2024 \$ _____ | <input type="checkbox"/> Monthly | |

Please make checks payable to: **Legacy Christian School**
You may also donate using a credit card at www.legacycs.org/donate/

THANK YOU for your pledge and support!