



Healthy Minds Healthy Communities: The Campaign for Genesis Behavioral Health

Pledge Form

Yes! I/We, _____, pledge the sum of
\$ _____ to Healthy Minds Healthy Communities: The Campaign for Genesis Behavioral Health.

I/We intend to fulfill this pledge by making payment as follows (to be received in full by 05/31/2019 unless otherwise arranged)

My/Our gift will be made in the following installments:

\$ _____ on or before _____.

\$ _____ on or before _____.

\$ _____ on or before _____.

\$ _____ on or before _____.

\$ _____ on or before _____.

I/We will make our gift by credit card (circle one):

 Visa MasterCard Discover

Credit Card # _____

Expiration date _____ CVV Number _____

Signature _____

Please see reverse side

Ways of Giving

Gifts of Cash: Please mail this pledge form and checks payable to the Genesis Behavioral Health: GBH, Attn: Development Office, 111 Church St, Laconia, NH 03246

Credit Card Gifts: Credit card payments are accepted through this form or online at

http://www.genesisbh.org/get_involved.php?pid=35

Gifts of Stock: If you would like to make a gift of appreciated stock please contact Ann Nichols, Development Director at anichols@genesisbh.org or 603-524-1100 X445.

Pledges: Gifts may be pledged for receipt by May 31, 2019. If you are interested in extending the timing of your pledge beyond this date, we are happy to talk with you. Please contact Ann Nichols, Director of Development at anichols@genesisbh.org or 603-524-1100 X445.

Planned Gifts: If you are interested in including Genesis Behavioral Health in your estate plans, please contact Please contact Ann Nichols, Director of Development at anichols@genesisbh.org or 603-524-1100 X445.

Contact Information

Name as you wish to be acknowledged: (Please print)

I wish to remain anonymous

I wish to make my gift in (circle one) honor/memory of _____

Your mailing address:

Telephone number: _____ Email address: _____

Naming Opportunity

Yes, I would like to be recognized with a naming opportunity. Here is what I choose:

Matching Gift

My company has a matching gifts program:

(Name of company)

For additional information, please contact Ann Nichols, Director of Development at anichols@genesisbh.org or 603-524-1100 X445.

Please send contribution and pledge form to:

Genesis Behavioral Health, Attn: Development Office, 111 Church St, Laconia, NH 03246

Thank you!