

Pledge/Donation



The SPR Research and Education Foundation

Donor Information (please print or type)

Name	
Billing address	
City	
State	
ZIP Code	
Telephone (home)	
Telephone (business)	
Fax	
E-Mail	

Pledge/Donation Information

I (we) pledge a total of \$_____ to be paid: ___ now ___ monthly ___ quarterly ___ yearly.

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

I (we) wish to direct this pledged contribution in support of:

Check Selection	Restricted Fund	Purpose
	Heidi Patriquin Fund	Patriquin Fund for International Education
	Jack Haller Fund	Haller Award for Excellence in Education
	In memory/honor of	Name:
	If you wish family/honoree to be notified, please provide address of any non-member.	

Credit card payments can be made online at the SPR website.

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:

The SPR Research and Education Foundation

1891 Preston White Drive

Reston, VA 20191 Fax: 703-880-0013