



MLK PLEDGE FORM
CITY MISSION SOCIETY OF BOSTON
Day of Service and Learning
January, 14, 2012



Name of Participant: _____

Donor Information:

First Name: _____ Last Name: _____

Address: _____ City: _____

State: _____ Zip/Postal Code: _____

Phone: _____ Email: _____

Payment Information:

Pledge Amount:

- "I have a Dream!" Pledge: \$25.00
- "Let Freedom Ring" Pledge: \$20.00
- "Justice" Pledge: \$10.00
- "Peace" Pledge: \$5.00
- "Promise Land" Pledge: Other: _____

Method of Payment:

- Cash
- Check (Make payable to **CMS Boston**) Check #: _____
- Online payment (PayPal available at www.cmsboston.org)

Turn your completed form & pledge into your Church Leader or mail to the following:
City Mission Society
14 Beacon Street, Suite 203
Boston, MA 02108

Thank you for your pledge to the MLK Day of Service and Learning!