JJs Playhouse Children's Museum & Gym Capital Campaign Pledge Form

Donor Information				
Name(s)				
Billing Address				
City	St	ate Zip		
Phone(s)				
Email(s)				
Sponsoring an Exhibit or Program				
I wish to sponsor	in the amount of \$			
Naming a Specific Gallery				
I wish to name		in the amount of \$		
Giving to a Specific Fund		☐ Party/Educational	Program Room	
			ogy, Engineering, Art, Math	
I wish to donate \$	_to the following fund:	☐ Intergenerational	or chilaren Programming	
Gifts in Honor		☐ Traveling Exhibit H	-	
For gifts in honor, please list the honore	ee's name and addres	ss.		
Name(s)				
Address				
City				
☐ I wish to have this gift remain anony	mous. \square Please se	end me a pledge rer	minder.	
Payment Information				
Donations and pledge payments can	be made online at <u>ww</u>	vw.jjsplayhouse.org	and click Donate.	
Pledges may be made over five years.				
Amount to be paid: Year 1 \$ Ye				
I will begin pledge payments in the month				
Gift will be matched by with instructions/form to be forwarded.		(founda	tion/tamily/company)	
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Please make checks payable to:	Gifts of Stock mo	ay be made at BB&T Sc	cott & Stringfellow	
JJs Playhouse, Inc.	Account Name: JJ's Playhouse Children's Museum.			
3645 Marketplace Blvd., Ste. 130-247 Atlanta, GA		Payments to this account may be mailed to: BB&T Scott & Stringfellow, 3630 Peachtree Rd, NW, Ste. 250, Atlanta, GA		
30344 (678) 557-4230	•	Julie Tener or Zach Cat		
Signature	Date		(a)	
Signature	Date		ON HOUSE	

CHILDREN'S MUSEUM & GYM™