



Yes! I would like to support St. Pius X Catholic High School.

Step 1

Personal Information

Name(s) _____ Date: _____
(as you wish to appear in our listing of donors)

Address _____

City _____ State _____ Zip _____

Telephone _____ Relationship to School (e.g. Parent, Alumnus/a, etc.) _____

E-mail _____

Step 2

Annual Fund Campaign Pledge

Yes! I support the ANNUAL FUND Campaign
 Total annual pledge (payable by 5-31-11) \$ _____

To be paid in payments of \$ _____

Annually Quarterly Monthly Other _____
(specify)

Pledge beginning date (MM-YY) _____

Amount enclosed \$ _____

I wish this gift to remain anonymous. I have already contributed to the Annual Fund 10-11

ONLINE GIFTS www.spx.org/giving



Annual Fund Campaign Giving Levels:

The Society of St. Pius X \$20,000+ **Domini Sumus Society** \$5,000+ **Monsignor Maloney Society** \$1,000+ **Bell Tower Guild** \$250+
Cardinal Sarto Society \$10,000+ **Monsignor Young Society** \$2,500+ **1958 Guild** \$500+ **Principal's Guild** Gifts up to \$250

Step 3

Capital Campaign Pledge

Yes! I support the EXPANDING OUR LEGACY Capital Campaign
 Total campaign pledge (payable by 12-31-11) \$ _____

To be paid in payments of \$ _____

Annually Quarterly Monthly Other _____
(specify)

Pledge beginning date (7-1-10) _____

Amount enclosed \$ _____

I wish this gift to remain anonymous. I have remembered St. Pius X in my will or trust.

I am unable to make a donation at this time, but I will make a commitment of prayer for the campaign.



Expanding Our Legacy Capital Campaign Giving Levels:

Pope Pius X Legacy \$100,000+ **Father Harrison Society** \$30,000+ **Sustainer** \$7,500+ **Patron** Gifts up to \$5,000
Bishop Hyland Founders Guild \$50,000+ **Visionary** \$15,000+ **Benefactor** \$5000+

Step 4

Payment Information

Option 1: My check is now enclosed. Checks should be made payable to St. Pius X Catholic High School.

Option 2: My gift will be in the form of stock or an appreciated asset. www.spx.org/giving.

Option 3: Please charge my Visa Mastercard AMEX Discover

Credit card number _____ Expiration date _____

_____-_____-_____-_____- _____

Name _____ Signature: _____
(as it appears on your card)

Matching Gifts: My gift will be matched by my company.
(please enclose your company's matching gift form)

Thank you for your support of St. Pius X Catholic High School!

All contributions are tax deductible. For additional information, please call David Buechner, Director of Development at 404-633-4290 x273.