

**OAK SHADE HALL CHAIR REPLACEMENT PROJECT PLEDGE FORM**

Name: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email address: \_\_\_\_\_

I pledge to assist the G.A.F. Society purchase:  1  2  3  4  8 (a whole table) chair(s) (\$50 each).

I agree that once the Trustees approve the purchase, I will send my tax-deductible contribution, made payable to the G.A.F. Society to: P.O. Box 167561, Oregon, OH 43616-7561

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Signature