

*Wagion
Hemlock
Society*



Name _____

Address _____

City _____ State _____ Zip _____

Employer _____

_____ Employer has a matching gift Program

Home Phone _____

Business Phone _____

E-Mail _____

District _____ Unit # _____

_____ Pack _____ Troop _____ Crew

Suggested Level of Contribution: \$1000

Total Pledge Amount _____

Amount Enclosed Today _____

Remaining Balance _____

Please Bill Me

_____ Monthly _____ Quarterly _____ One Time

Charge My Investment to My Credit Card

_____ Visa _____ Mastercard _____ Discover

Card # _____

Expiration Date _____

Name as it appears on card

Signature _____

* Society membership starts at the \$1000 level.

** Bills will come from the Westmoreland Fayette Council

Please return to: Westmoreland Fayette Council
2 Garden Center Drive, Greensburg, PA 15601