



723 Coleman Avenue
 Corpus Christi, TX 78401
 361-883-8652 (TOKC)

2021 PLEDGE FORM

CONTRIBUTOR INFORMATION (Your personal information is kept confidential)

Last Name: _____ First Name: _____ MI: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone Numbers: Primary (_____) _____ Secondary Primary (_____) _____

Email Address: _____

DONATIONS

A One-Time Donation In the Amount of:

\$5 \$10 \$25 \$50 \$100 \$250 \$500 \$1,000 Other: \$ _____

SPONSORSHIP

CONTRIBUTION(S) (ALL Capped at \$1,000)

I Pledge \$ _____ (\$5.00/\$10.00) for every **Birdie/Eagle** made during the
 2021 LJT James A. Ragan Memorial

I Pledge \$ _____ for every **Birdie/Eagle** made by _____
 @ the 2021 LJT James A. Ragan Memorial *Name of Player*



Funds matched by:



Please **email/send** completed form to:

TOKC
 723 Coleman Avenue
 Corpus Christi, TX 78401
 TOKC@TriumphOverKidCancer.org