



Houlton Community Golf Club

PLEDGE FORM

Date: _____

Name: _____

Address: _____

E-mail: _____

Cell Phone: _____ Home Phone: _____

Total Pledge Amount: \$ _____

PAUL D. MADIGAN MEMORIAL FUND

- I wish to purchase stock in the Houlton Community Golf Club at \$125.00 per share (minimum purchase 8 shares – all purchases subject to Board approval).
 - Make checks payable to HCGC.

- I wish to make a donation directly to HCGC.
 - Make checks payable to HCGC.

GOLF FOR LIFE PROGRAM

- I wish to donate to **Vital Pathways**, a local 501(c)(3) non-profit and the Golf for Life Committee, whose mission is to promote health, wellbeing and community through the outdoor sport of golf which can be engaged in throughout life.
 - ✓ Make checks payable to Vital Pathways, and mail to HCGC.
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Please select from the following donation payment options:

- One-time payment for the pledge amount listed above.

 - Pay over time (up to 3 years)
 - ✓ Describe payments terms (i.e., 3 annual payments, first to be paid by July 15, 2021)
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Notes: _____
