



# Scholarship Program

## PLEDGE FORM

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

Title: \_\_\_\_\_

Dealership/Company: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

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**Pledge to GM MDD scholarship:**

\$25     \$50     \$75     \$100     \$200     \$500     \$1,000     Other \$\_\_\_\_\_

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Credit Card: (you may call the CMS Foundation and provide your credit card info over the phone at 1-630-428-2412)

American Express     Visa     Mastercard     Discover

Credit card #: \_\_\_\_\_ Exp. date: \_\_\_\_\_ 3 or 4 digit security code: \_\_\_\_\_

Name on card: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Check:

Make payable to: CMS Foundation, Inc.

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Form may be mailed, faxed or emailed: (if sending credit card information, email is not recommended)

CMS Foundation, Inc.  
PO Box 648  
Naperville, IL 60566  
Phone: 1-630-428-2412  
Fax: 1-630-428-2695  
Email: [info@gmmdscholarship.com](mailto:info@gmmdscholarship.com)

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Donations are tax deductible to the fullest extent of the law