



FRIENDS OF SCOUTING PLEDGE FORM

*Georgia Carolina Council remits tax receipts in the first quarter of the following calendar year.

Pack / Troop / Crew #: _____

County: _____

Name: _____

Company name (if applicable): _____

Address: _____

City / State / Zip: _____

Daytime / Cell phone: _____

Email: _____

*One time gift amount: _____

*Pledge: _____

Please bill me (beginning date _____): biannually / quarterly / monthly

Payment: cash / check / credit card: _____

Expiration date: _____ CVV code: _____

For donations specific to KIOKEE RIVER District, I approve my name being listed on their district website page. (please circle one): yes / no

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Council Tracking