

# Parent Pledge

Please fill out this form and mail it with your check to:

**LEAP**  
P.O. Box 268,  
San Geronimo, CA 94963

I would like to make a pledge in the amount of

\$1000

\$500

\$400

\$200

Other Amount:

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Please designate my contribution according the percentage indicated:

Montessori %

Open Classroom %

Middle School %

Payment Schedule (please choose one):

Full payment enclosed

Initial payment enclosed, bill me for the  
balance

Automatic monthly payment

of \$

(for automatic payments please enclose a voided blank check for processing. Payments will be made to the LEAP  
Parent Pledge account at Union Bank each month)

Signature:

Printed Name:

Phone Number:

LEAP is a 501(c)3 organization, and all donations are tax deductible to the extent allowed by law.