



Fairhill Fitness Week & Fun Run Pledge Form

Donor Information

Name _____
Phone _____
Email _____

Pledge Information

I (we) would like to make a pledge on behalf of: _____
Student name(s) and grade(s)

I (we) pledge a total of \$_____ to be paid.

I (we) plan to make this contribution in the form of: ☐ cash ☐ check

Leave a Comment

Include a comment in your donation to be posted online: _____

☐ I (we) wish to have our gift remain anonymous.

Signature(s)

Date

Please make checks, corporate matches,
or other gifts payable to:

Fairhill Elementary PTA
3001 Chichester Lane
Fairfax, VA 22031

**Return donation with this form to your child's
teacher OR the main office**

Online option: <https://app.99pledges.com/fund/fairhillES23>

