



WALLOON
LAKE
ASSOCIATION AND
CONSERVANCY

PRIMARY GUARDIAN PLEDGE AGREEMENT

A Three-Year Commitment to Protect Walloon Lake

In support of the Walloon Lake Association and Conservancy's annual Guardian Fund campaign,
I/we commit to a three-year pledge of support.

Annual Pledge Amount: \$ _____

Pledge Begins (Month/Year): _____

Preferred Annual Reminder Month: _____

DONOR RECOGNITION

Name(s) as you would like them to appear in WLAC donor recognition materials:

Name(s): _____

☐ I/we wish to remain anonymous.

DONOR INFORMATION

Mailing Address: _____ **City, State, ZIP:** _____

Phone: _____ **Email:** _____

PLEDGE COMMITMENT

I/we understand that the Walloon Lake Association and Conservancy (WLAC) will rely on this pledge commitment when planning and making commitments for expenditures, projects, programs, and other obligations.

Signature: _____ **Date:** _____

Additional Signature (if applicable): _____ **Date:** _____

Please return a completed copy of this pledge agreement and your payment to:

Walloon Lake Association and Conservancy

PO Box 579

Walloon Lake, MI 49796