



Siddha Yoga Meditation Center in Honolulu

CENTER FUND PLEDGE FORM

I am offering \$ _____ Monthly (Every month)

Check Automatic Debit Cash

Name _____ Phone _____

Address _____ City _____

State _____ Zip Code _____

Checks Please make it payable to: **Siddha Yoga Meditation Center in Honolulu**

Mailing Address: **SYMC in Honolulu
2964 East Manoa Road
Honolulu, HI 96822
Attn: Pledge Administrator**

*If you have any questions, please call the Center's voice mail at (808) 597-9194, and leave a message. A Pledge or Finance Sevite will return your call. Thank you.

Automatic Monthly Debit

In addition to filling out this Pledge Card and signing below, you will need to fill out the Center Debit ACH form and place in the Center Offering Box. Or mail to address above.

Signature: _____

Cash can be dropped in an envelope in the Center Pledge Box in the Lakshmi Room at the Center. Please note the month and your name on the envelope each time.

This gift is tax deductible.

Thank you so much for making a financial commitment to your Center.

Our gifts support the Vision and Mission of Siddha Yoga Meditation.