

We aspire to transform and restore all lives touched by addiction one conversation, one education, one individual at a time.

What do you aspire to?

This pledge is made in honor/memory of: _____

Your Pledge for Recovery

Name (as you wish to be recognized in materials)

Address

City, State, Zip

Phone

Email

I am/we are pleased to support Archway Academy at the following level:

- \$9,600** Provides a full scholarship for one full year for an Archway student
- \$5,000** Supports the Annual College Fair
- \$1,000** Provides a partial scholarship for an Archway student
- \$500** Underwrites a college research trip
- \$250** Supports an academic field trip
- \$100** Provides essential supplies for teacher and students
- \$50** Provides monthly drug-testing fees
- Other** \$ _____

To be paid in cash, credit card or check. (please mark choice)

- Check enclosed
- Please charge my credit card for \$ _____
- Please charge my credit card for \$ _____ per month for one year

Card No.

AMEX _____ / _____ Security Code

VISA

MC Signature _____ Date _____

My company, _____
offers a matching gift program.