DEFERRED PAYMENT FORM Penguin Plunge

The fundraising minimum to participate in the Penguin Plunge is \$350. Please complete the top half of this form if you have not yet raised the \$350 and would like to receive your Plunge Pail now. You will have until April 30th to reach the fundraising minimum. We will charge the card you provide to us (via telephone) on May 1st for the outstanding balance. Please email completed forms to <u>SpecialOlympics@sonh.org</u>.

| I authorize Special Olympics New Hampshire to charge my credit card up to \$ | on Tuesday, May 1 st , |
|--|-----------------------------------|
| 2021 to make my total raised equal \$350. | |

| Printed Name of Plunger: | |
|--------------------------|---|
| Funds Raised to Date: | Balance (to reach \$350): |
| Plunger Name: | |
| Phone Numer: | |
| Email Address: | |
| A SONH Staff member wil | ll call the number listed above to collect your credit card details. For security |

reasons, please do not email your credit card information to us.

| (SONH Office Use Only) | | |
|-----------------------------|-----------|--|
| Credit Card Holder's Name: | | |
| Credit Card Holder's Email: | | |
| Credit Card Number: | | |
| Expiration Date: | Zip Code: | |
| Security Code: | | |
| SONH Staff Initials: | | |

