



**TEXAS ASSOCIATION  
of SPORTS OFFICIALS**

**Beaumont Baseball Chapter  
Scholarship Pledge Form**

**Donor Information (please print or type)**

Name	
Billing address	
City	
State	
ZIP Code	
Telephone	
Telephone (cell)	
Fax	
E-Mail	

**Pledge Information**

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

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

**Acknowledgement Information**

Please use the following name(s) in all acknowledgements:

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

Signature(s)
Date

Please make checks payable to:

TASO Baseball Beaumont Chapter - Scholarship Fund  
P.O. BOX 21146  
BEAUMONT, TEXAS 77720  
**501 (c) (3) EIN # 47-2951326**