

Chairlift Capital Campaign

BIGROCK MOUNTAIN

I / We pledge to commit the sum of \$ _____ to support
Big Rock Mountain's Ski Lift Campaign.

Name(s): _____

Address: _____

Email(s): _____

Phone(s): _____

Signature: _____

Date: ____/____/____

Signature: _____

Date: ____/____/____

This contribution is given in honor or in memory
of: _____.

I/We prefer to remain anonymous in any publications.

The check for \$ _____ is enclosed. *Please make checks payable to Big Rock Chair Lift Campaign*

I/We commit to complete this pledge according to the following schedule:

2023:

2024:

2025:

Month Amount

Month Amount

Month Amount

2026:

2027:

2028:

Month Amount

Month Amount

Month Amount

Mail to:

**Big Rock Chair Lift
Campaign**

PO BOX 1001
Mars Hill, ME 04758

Thanks to your support, your donation and that of other
businesses, individuals, and foundations will build this new chairlift
to top. For more information or to reach the fundraising team please
call 207-769-3700 or email liftcampaign@bigrockmaine.com.

Phone:

207-425-6711

E-Mail:

liftcampaign@bigrockmaine.com

Non-Profit Organization:

BIG ROCK

EIN:

01—538232

Routing Number:

011202392

Account Number:

10490028

Beneficiary:

Big Rock

Receiving Bank:

Katahdin Trust Company