



I want to step in the box and stand up for Springfield College Baseball.

To make your gift, go to springfield.edu/archieallenfield or complete and return this form.

Name _____

Address _____

City _____ State _____ Zip _____

Primary Phone _____ Email Address _____

- Please accept my one-time gift of \$1,000 to have a seat named at Archie Allen Field.
- I would like to make a pledge of \$1,000 to have a seat named at Archie Allen Field. I understand that I have two years to fulfill my pledge and that my message will not be installed on a seat until my pledge has been paid in full.

Payment Information

Please accept my gift of \$ _____

Method of payment

- Check (enclosed) check no. _____
- Mastercard VISA American Express

Credit Card Number _____ Expiration Date _____

Please place the following message on my seat:

Line No. 1: (30 characters per line maximum, including spaces and punctuation)

Line No. 2: (30 characters per line maximum, including spaces and punctuation)

Please complete this form and mail it to:

Springfield College
Office of Development
263 Alden Street
Springfield, MA 01109

