**KNOCK MS OUT OF THE PARK PLEDGE FORM**

Name_____

Mailing Address_____ City_____ State____ Zip_____

Phone #_____ Email_____

Please accept my flat pledge of:

☐ $20 ☐ $50 ☐ $100 ☐ Other $_____

I would like to pledge $_____ per home run.
Please cap my donation at $_____.

Payment Options (please check one):

- □ Check/Money Order (Made payable to National MS Society)
- □ Visa
- □ MasterCard
- □ Discover
- □ AMEX

Name on Card _____

Billing Address _____ City_____ State_____ Zip _____

Card # _____ Exp Date _____ Sec Code _____ (3 digit # on back)

Signature _____

**You could also make a donation on-line at:**

**https://secure.nationalmssociety.org/site/Donation2?idb=348463168&df_id=63761&63761.donation=form1**