



Make-A-Wish Greater Los Angeles Constellation Society Commitment Form

I/we would like to join the Constellation Society, a leading group of supporters committed to granting life-changing wishes for children with critical illnesses in the Greater Los Angeles area.

Name(s): _____

Please list as you would like your name to appear as a Constellation Society member.

I/we wish to remain anonymous: _____

Address: _____

City / State / Zip Code: _____

Phone: _____ **Email:** _____

Wish Champion \$500,000 pledge

Fully funds 45 wishes over five years, which includes the cash cost of each wish granted, costs to support our wish granting team and wish-related supplies, communications shared with our wish families and volunteers, and other associated expenses incurred in order to fulfill our robust wish pipeline.

Wish Visionary \$100,000 pledge

Covers the cash cost of fifteen wishes over five years.

Wish Hero \$50,000 pledge

Covers the cash cost of seven wishes and wish-related expenses over five years.

Wish Joy \$25,000 pledge

Covers the cash cost of three wishes and wish-related expenses.

Wish Strength \$10,000 pledge

Covers the cash cost of one wish and wish-related expenses.

Wish Hope \$5,000 pledge

Paired with another \$5,000 gift, covers the cash cost of one wish and wish-related expenses.

I will fulfill my pledge as follows:

- Annual payments
- Semi-annual payments
- Quarterly payments
- Monthly payments

Upon receipt of this commitment form, a member of our team will contact you regarding fulfillment of your pledge.

Questions? Please contact Elizabeth Park, epark@LA.wish.org.

Please return to: Elizabeth Park, Director of Philanthropy
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