



## KEEP THE WUSA DREAM ALIVE TICKET FUND Pledge Form

We the club, players, coaches, parents, organizations, businesses and/or individuals proudly pledge to the *KEEP THE WUSA DREAM ALIVE TICKET FUND!* We acknowledge that this is an annual pledge, for each of the next three years. Our goal is to bring back the WUSA and assure the continued success of all that it represents. We join with countless other clubs, groups, organizations/businesses and/or individuals from the United States and around the world with the goal in mind to raise \$2.5 million per year from 2005-2007. Together we can accomplish something incredibly special, in partnership, we will – *KEEP THE WUSA DREAM ALIVE!*

**Club/Organization/Business/Individual Name:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_ **Contact Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

I, \_\_\_\_\_ (print name), on behalf of \_\_\_\_\_, agree to pledge \$ \_\_\_\_\_ on an annual basis to the WUSA Ticket Fund from 2005-2007 to the \_\_\_\_\_ (WUSA Team).

-OR-

I, \_\_\_\_\_ (print name), would personally like to make a one-time pledge to the WUSA Ticket Fund in the amount of \$ \_\_\_\_\_ to the \_\_\_\_\_ (WUSA Team).

Please note that if no WUSA team is designated to receive your pledge, your voucher will be exchanged for tickets for a charity designated by the WUSA or provided to a WUSA team for distribution.

- Participants signing this KEEP THE DREAM ALIVE TICKET FUND Pledge Form must be 13 years of age or older. Please check this box to verify this is true.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please Mail the KEEP THE DREAM ALIVE TICKET FUND Form to:

WUSA  
C/O Lauren Gregg  
P.O. Box 8338  
Charlottesville, VA 22906

\* Please visit [WUSA.com](http://WUSA.com) for more updates on the WUSA! \*