

Pledge Card  
Reach Out and Read

**YES!** I/we want to help Reach Out and Read make a love of reading part of a healthy childhood with a pledge of \$\_\_\_\_\_.

Please print all names legibly and exactly as they should appear in all publications.

Name: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_ Email: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Billing Information:

Enclosed is a check in the amount of \$\_\_\_\_\_.

*Please make check payable to: **Reach Out and Read, Inc.***

Please charge my:  Discover  MasterCard  VISA  Amex

Signature: \_\_\_\_\_

Card number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Security code: \_\_\_\_\_

**\*\*Funds should be deposited to Cambridge Pediatrics, LLC, Account/Site# 4451  
Scholastic Acct# 716991\*\***

Thank you for supporting Reach Out and Read!

Reach Out and Read  
56 Roland Street, Suite 100D  
Boston, MA 02129-1243  
617-455-0600  
[www.reachoutandread.org](http://www.reachoutandread.org)