PLEDGE FORM of PLAYER, _____ (phone: _____), who is collecting pledges for the Free the Clinic SCRABBLE® Tournament on Saturday, January 30, 2010, from 1:00 p.m. - 5:30 p.m. at Old Brick, 26 E. Market, Iowa City, to benefit the Iowa City Free Medical Clinic and Dick Parrott Free Dental Clinic. Donors can pledge a lump sum. ***Checks should be made out to the Iowa City Free Medical & Dental Clinic.***

Donor's Name	Donor's Street Address, Town, State, Zip Code	Donor's Phone #	Pledge Amount:	Paid & enclosed?

** Please turn this pledge form in at the Free the Clinic SCRABBLE® Tournament on January 30, 2010 at Old Brick, or if that is not possible, please mail it or bring it to the **Iowa City Free Medical & Dental Clinic, 2440 Towncrest Drive, Iowa City, IA 52240 (319-337-4459).** Please collect all lump sum pledges and enclose them with your pledge form. ***THANK YOU FOR YOUR SUPPORT!!***