

DONOR INFORMATION

Name _____ Class Year _____

Spouse Name _____ Spouse Class Year _____

Address _____ City State Zip _____

Email _____

GIFT INFORMATION

One-Time Gift

Gift Amount: \$ _____

Credit Card Check (payable to Stonehill College)

Recurring Gift

Gift Amount: \$ _____

to be paid **every** Month Quarter
 Twice A Year Year

Credit Card Checking Account (include voided check)

GIFT DESIGNATION

Stonehill College Fund GoHill Fund (Athletics) Scholarships

Other _____

PAYMENT INFORMATION

Recurring and One-Time Gift by Credit Card

American Express Expiration Date _____

MasterCard _____

VISA Security Code _____

Card Number: _____

Name on Card: _____

Signature: _____

Recurring Gift by Checking Account

*Please include a voided check with this form and fill in the details below. *The routing number always comes first and is exactly 9 digits. The account number varies in length and may appear before or after the check number. Include leading zeros. Omit spaces and non-numeric characters.*

ABA Routing Number: _____

Account Number: _____

Name on Account: _____

***PLEASE READ AND SIGN BELOW:** *Required for recurring credit card or checking account payments.*

I hereby authorize my bank or credit card company to charge my account according to the frequency selected and pay Stonehill College the amount indicated above. This authorization will remain in effect until I, Stonehill College or my financial institution revoke it in writing.

Signature: _____

Date: _____

Thank you for making your gift!

Please mail completed form to:
Office of Development | Stonehill College | 320 Washington Street Easton, MA 02357-6242
To make your gift online, visit www.stonehill.edu/giving