

## **STONEHILL COLLEGE FUND**

| NAME:   |                           |                          | CLASS:  |                    |           |
|---|---------------------------|--------------------------|---------|--------------------|-----------|
| SPOUSE NAME:  |                           |                          | SPOUSE  | CLASS:             |           |
| RELATIONSHIP TO STONEHILL:  |                           |                          |         | AFF 🗌 RETIREE      | □ STUDENT |
| ADDRESS:  |                           |                          |         |                    |           |
|   |                           |                          |         |                    |           |
| TELEPHONE:  | EMAIL:                    |                          |         |                    |           |
| PLEASE ACCEPT MY/OUR GIFT   | OF:                       |                          |         |                    |           |
| □ \$1,000 □ \$5   | 00 🗆 \$250                | □ \$100                  | □ \$50  | □ \$25             |           |
| □ OTHER:  |                           | GIFT IS A PLEDGE PAYMENT |         |                    |           |
| PLEASE CHARGE MY/OUR GIFT MY/OUR GIFT IS ENCLOSED (Please make checks payable to Stonehill College) |                           |                          |         |                    |           |
| PAYMENT METHOD:   |                           |                          |         |                    |           |
| CREDIT CARD: AMERICAN   |                           |                          |         |                    |           |
| Card Number:  |                           |                          |         |                    |           |
| EXPIRATION DATE:  | Sec                       | URITY CODE:              |         |                    |           |
| Name on Card:   |                           |                          |         |                    |           |
| SIGNATURE (PLEASE PRINT AND S   | SIGN OR ENTER YOUR INIT   | ALS):                    |         |                    |           |
| MATCHING GIFT COMPANY:  |                           |                          |         |                    |           |
| Please find the $\Box$ form enclosed  | l or 🗆 form will be forwa | ırded.                   |         |                    |           |
| GIFT DESIGNATION:   |                           |                          |         |                    |           |
| STONEHILL COLLEGE FUND  | □ Scholarsh               | IPS                      | 🗆 GoHil | l Fund (Athletics) |           |
| □ OTHER (please specify)  |                           |                          |         | - (,               |           |
| My gift is a tribute to some<br>□ In honor of □ In memory of  |                           |                          |         |                    |           |
|   |                           | OU FOR YOUR SUPP         |         |                    |           |
|   | Please mail               | completed for            | rm to:  |                    |           |
| Office of Develop   | oment   Stonehill College |                          |         | iton, MA 02357-62  | 42        |

To make your gift online, visit <u>www.stonehill.edu/giving</u>.