

CONTRIBUTION FORM

Name (please print) _____ Class year _____

Address _____ City _____ State _____ Zip _____

Home phone _____ Business phone _____ Email _____

Enclosed is my gift of \$ _____.

Charge my gift of \$ _____ to my: Visa MasterCard Discover American Express

Card # _____ Exp. date _____

Name as it appears on credit card _____

Signature _____ Date _____

I would like to receive information about making an ongoing contribution through electronic funds transfer.

My company will match this contribution. A matching gift form is enclosed.

Gift designation and purpose

Please direct my gift to (check one):

- University
- College of Liberal Arts
- Barbara Simmons Endowed Scholarship
- Anna Arnold Hedgeman Scholarship Fund
- MISA Fund
- PRIDE Assistance Fund

Gift purpose (check one, applies to university and CLA gifts only):

- Greatest need (unrestricted)
- Other (please specify) _____

Optional: This gift is given

- in honor of in memory of _____

Annual giving societies

The following societies recognize donors who support Hamline University at several giving levels.

- 1854 Circle of Donors (\$1,854 unrestricted)
- President's Circle/Justice Society (\$1,000)
- Wesley Club/Law Society (\$500 to \$999)
- Old Main Club/Law Advocates (\$250 to \$499)
- Hewitt Club/Amicus Society (\$150 to \$249)

I would like information on how to include Hamline University in my/our will.

Hamline University is included in my/our will or estate plans.

Thank you for your gift!

To give online using Hamline University's secure website, go to www.hamline.edu/giving.
For more information, please call 1-800-767-5585

Return this form to: Office Of Development
Hamline University MS-C1917
1536 Hewitt Avenue, Saint Paul MN 55104