

# WHITMAN REUNION

Amount

\$

Designation

**Class of 1970 Scholarship Endowment**

**Annual Fund** (unrestricted)

**Other** \_\_\_\_\_

Name(s)



Gift not joint gift with spouse/partner

Address

Phone

Email



**One-time gift**

**Recurring gift** (Automatic: monthly, quarterly, biannual or yearly gifts)

**Multi-year pledge** *The entire amount counts toward your reunion fund!*

(Gift amount spread out over multiple payments up to 5 years. Indicate below)

**First payment date:** \_\_\_\_\_ **Last payment date:** \_\_\_\_\_

\$	\$	\$	\$	\$
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**Enclosed is a check** (payable to Whitman College)

**Charge the following Credit Card** (Visa, MasterCard, Discover, American Express, JCB)

Card # ..... Exp date: MM.....YYYY.....

**Signature** (for pledges and credit card gifts) \_\_\_\_\_

**Special Instructions for handling my gift:**

This gift is in honor or memory of \_\_\_\_\_.

My employer, \_\_\_\_\_, will match my gift. I will contact my Human Resources office.

Whitman is in my will, I'd like to join the Dorsey Baker Legacy Society.

I would like information about gift planning and tax saving benefits.  
Please send it to me by:

mail

email