



ROYCEMORE



Thank you for your thoughtful inclusion of Roycemore School in your philanthropic gift plans.

Name: _____
(As you would want it to appear for donor recognition)

Preferred Address _____

City, State, Zip _____

Daytime Telephone _____ E-mail(s) _____

How would you like to support the Annual Fund? *(Gifts of \$1,915 or more will be included in the 1915 Society)*

Option 1: One-Time Gift I (we) wish to make a one-time gift of \$_____ to support the Annual Fund.

Option 2: Pledge to be fulfilled by June 30, 2020

I (we) wish to pledge \$_____ to support the Annual Fund. Payments will be made in semi-annual Quarterly or Monthly Installments of \$_____ over the next _____ months. Start Date: -

_____ Complete Date: _____ Please choose the following if you have selected Pledge payment option: Send Reminders Automatically charge my credit card based on installment plan selected

Option 3: Payment from a Private Foundation or Donor Advised Fund

(Per IRS regulations, gifts from private foundations or donor advised funds cannot be used to satisfy a personal pledge)

I (we) intend to request our private foundation or donor advised fund to make a total payment of \$_____ to be paid in annual semi-annual Quarterly or Monthly Installments of \$_____ over the next _____ months to support the Annual fund. Start Date: _____

Payment Information

Check made payable to Roycemore School Stock Credit Card Electronic Funds Transfer

CREDIT CARD INFORMATION			
Name as it appears on card: _____			
Card Type: <input type="checkbox"/> Visa	<input type="checkbox"/> Master Card	<input type="checkbox"/> American Express	<input type="checkbox"/> Discover
Card Number: _____	Expiration Date: _____	CVC Code: _____	
Authorized Signature: _____			

Additional Gift Information:

Notes regarding my gift and intent:

I wish for my gift to remain anonymous
 My (our) gift is eligible for matching gift funds through _____

By signing below I confirm the details of my commitment to Roycemore School and authorize payment of each commitment as noted above.

Signature _____ Date _____

Roycemore School is a 501(c)3 non-profit organization. Please contact your financial advisor regarding your tax benefits. For additional information contact Sara Keely McGuire, Director of development at 847-866-6055 or smcguire@roycemoreschool.org.