



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 Griffin Campaigns? (Gifts of \$1,915 or more will be included in the 1915 Society)

I would like to support the Annual Campaign in 2021-2022 with the amount \$ _____

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, 2022

I (we) wish to pledge \$ _____ to support the Annual Fund. Payments will be made in

Annual semi-annual Quarterly or Monthly Installments of \$ _____ over the next _____ months.

Start Date: _____ Complete Date: _____

Please

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 would like to support the GriffinNOVATION Campaign with the following:

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

Option 2: Pledge to be fulfilled by June 30, 2026

I (we) wish to pledge \$ _____ to support the Capital Campaign. Payments will be made in

Annual 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

Payment Information

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

If you would like to use a credit card, please visit our website or call 847-866-6055 to complete your transaction.

I/We have included Roycemore School in my/our estate plans in the following manner:

___ Bequest ___ Trust ___ Other: Details as follows _____

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.