

# YOUR GIFT TO WMU

Thank you for supporting Western Michigan University.  
Visit [MyWMU.com/Give](http://MyWMU.com/Give) to make your gift online.

# WESTERN MICHIGAN UNIVERSITY

## DONOR INFORMATION

Name

Preferred Address

City State ZIP

Phone

Email

## HONOR/MEMORIAL

This gift is in  honor of  memory of: \_\_\_\_\_

Please notify: \_\_\_\_\_ Name

Name

Address

City State ZIP

*Your employer may double or triple you gift!  
Visit [MyWMU.com/Give](http://MyWMU.com/Give) to learn more*

- I have enclosed a matching gift from my employer or my spouse's employer.
- Please send information about joining the Founders Societies.

*Please send this form along with your gift to:  
WMU Foundation  
1903 W Michigan Ave  
Kalamazoo, MI 49008-5403*

Questions? Contact (269) 387-8700 or [help@mywmu.com](mailto:help@mywmu.com)

## AREA(S) TO SUPPORT:

- \$ \_\_\_\_\_ Area of Greatest Need (Unrestricted Fund)
- \$ \_\_\_\_\_ Student Scholarships
- \$ \_\_\_\_\_ College: \_\_\_\_\_
- \$ \_\_\_\_\_ Department: \_\_\_\_\_
- \$ \_\_\_\_\_ Other: \_\_\_\_\_

## GIFT INFORMATION:

- My one time gift of \$ \_\_\_\_\_ is enclosed.
- I/we pledge a total of \$ \_\_\_\_\_.
- The first  monthly  quarterly  annual payment of \$ \_\_\_\_\_ is enclosed.
- Process credit card installments on the  1st  15th of each month:  monthly  quarterly  annually.

## GIFT PAYMENT OPTIONS

- Check payable to the WMU Foundation enclosed
- Please send instructions to authorize an Electronic Funds Transfer (EFT)
- Credit Card (provide information below)

Card # \_\_\_\_\_ Expires: \_\_\_\_\_

VISA  MasterCard  Discover CVV: \_\_\_\_\_

\_\_\_\_\_  
Billing Name & Address (if different than preferred)

\_\_\_\_\_  
Signature (required)

\_\_\_\_\_  
Date