

# 2009 Senior Class Gift Form

Please return form to the Office of College Advancement located in Main Hall on third floor or to a Senior Class Gift Committee Member. Fields marked with an asterisk (\*) are required.

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\*I would like to support the Senior Class with a gift of:

\$100    \$50    \$25    \$20.09    \$10    Other amount \$ \_\_\_\_\_

Please apply toward the Senior Class Gift Scholarship

Other (please specify) \_\_\_\_\_

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## \* Personal information

Name: \_\_\_\_\_ SNC Student Id#: \_\_\_\_\_

Address line 1: \_\_\_\_\_

Address line 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Preferred Telephone: (\_\_\_\_) \_\_\_\_\_  Home  Work  Mobile

Preferred E-mail: \_\_\_\_\_

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## Honoree's Information

Gifts may be made in honor of the person or persons that helped make your St. Norbert College experience special. Honorees may include family, professors, friends, etc. For dedications to SNC faculty, students, and staff please list their campus address:

Mr.    Mrs.    Ms.    Mr. and Ms.    Other \_\_\_\_\_

Name(s): \_\_\_\_\_

Address line 1: \_\_\_\_\_

Address line 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Dedication: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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## \*I would like to pay with:

Credit card    Custom Cash    Check    Cash

Card Type:  Visa    MasterCard    American Express    Discover

Name as it appears on card \_\_\_\_\_

Card number \_\_\_\_\_ Exp month/yr \_\_\_\_/\_\_\_\_

Signature: \_\_\_\_\_ (if using Credit Card or Custom Cash)

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**Additional comments:** \_\_\_\_\_

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