



GIFT FORM

NAME (FIRST, LAST)	
EMPLOYER/TITLE	
CLASS YEAR	
PREFERRED EMAIL	
PREFERRED PHONE	
ADDRESS	
CITY, ST, ZIP	

YES, I WOULD LIKE TO SUPPORT THE NEXT GENERATION OF STUDENTS:

	The Maria Fund-Where the Need is Greatest
	Scholarships
	Student Success
	Other (please specify)

GIFT AMOUNT: _____ CHECK ENCLOSED

Make My Gift Recurring!

Enroll me in the Chrysalis Recurring Giving Society with my donation
(Please Circle One): Monthly/Quarterly/Annually

Double your Impact with a Matching Gift!

Please consult with your employer's personnel or human resources office to determine if your employer will match your charitable donation to Maria College.

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- Yes, I would like to learn more about the McAuley Society and leaving a planned gift to Maria
 Yes, I have included Maria in my estate plans
 Yes, I would like to learn more about how to volunteer
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Questions?

Please contact The Office for Institutional Advancement at 518-861-2579 or
alumni@mariacollege.edu

THANK YOU FOR SUPPORTING OUR STUDENTS!