Grinnell College

Class of 2015 - 5th Cluster Reunion
Giving Agreement

_____ _____
Name(s) *Class year*

_____
Address

_____
City, State, Zip

_____
Phone, E-mail

1. I/we will support Grinnell with a:

❑ ONE-TIME gift of: $_____

❑ MONTHLY SUSTAINING gift of: $_____. Please charge my credit card on receipt of this form and at the same time each successive month.

2. How I/we wish to direct this giving: (*if selecting more than one area to support, please show amounts for each, total to equal total in part 1*)

$ _____ Pioneer Fund
$ _____ Scholarships and Financial Aid
$ _____ Center for Careers, Life, and Service
$ _____ Individually Advised Teaching and Learning
$ _____ Institute for Global Engagement
$ _____ World-Class Facilities
$ _____ Other:_____
$ _____ Total (**per month total for sustaining gifts**)

Gifts received by June 30, 2020 will be recognized at the following giving community levels:

Presidents' Circle: $25,000 and above
Deans' Circle: $10,000 to $24,999
Founders' Circle: $1,846 to $9,999
James J. Hill Circle: $174 – $1,845
Grinnell Circle: $1 – $173

3. Payment Information

❑ Check Enclosed

❑ I/We would like to make a gift using a credit card (Required for sustaining gifts).

❑ American Express ❑ Discover ❑ MasterCard ❑ Visa

Credit card number | *Expiration date* (*Month* / *Year*) | *Card security code* (Found on the reverse or front side of the card)

Name as it appears on card: _____

4. Optional Gift Details

My/Our gift is: ❑ In memory of *or* ❑ In honor of

_____
Name (please print)

_____
Address (*For honorary gifts, a card is sent to notify the honoree.*)

❑ I/We would like this gift to be anonymous.

❑ I/We have included or would like to learn more on how to include Grinnell in my/our estate plans.

To make your gift online, please visit **alumni.grinnell.edu/2015give**

If you recently made a gift to Grinnell, thank you for your support!

Annual Giving, Office of Development and Alumni Relations, Grinnell College, 733 Broad Street, Grinnell, Iowa 50112 • 866-850-1846