



Mercy College Foundation Giving Form

Donor Information

Prefix First Name Last Name

For recognition purposes, please acknowledge my/our gift as follows:

Example: Mr. & Mrs. John Smith or John & Mary Smith

Address City State Zip

Phone (example: xxx-xxx-xxxx) Email Address

I am a: Mercy Graduate Former Student Other

Graduate Information

Graduation Year Major

Employer Title

Gift Information

Gift Amount: \$ _____ I would like my gift to remain anonymous: Yes No

My/Our pledge is designated for a specific fund: _____

Gift Type: New Gift Payment on Existing Pledge

Payment Method

Credit Card Payment By Check Employee Payroll Deduction

Card Type Card Number Expiration Date

Signature