

THE LOWELL WHITEMAN SCHOOL



Recurring Gift Form

Thank you for supporting The Lowell Whiteman School with your gift. Each contribution helps us sustain and enhance the LWS Experience for current students and generations to follow. Gifts are processed by Diamond Mind Business Services (www.diamondmindschools.com) through a secure transaction directly to The Lowell Whiteman School's bank account. American Express, Discover, Mastercard, and Visa are accepted.

Contact Information

Title ____ First Name _____ Middle Initial ____ Last Name _____ Maiden Name _____

Address 1 _____ Address 2 _____

City _____ State ____ Zip _____ Country _____

Phone _____ Email (*will be used to send receipt*) _____

Affiliation (e.g. Student, Parent, Alumni, etc.) _____ Class Year _____

For recognition purposes, I/we wish to have this contribution listed as a gift from: _____

____ Please initial here if you wish to remain an anonymous donor.

Please process my credit card for a total gift of \$ _____,

payable in _____ monthly installments starting on ____/____/____.

Gift Designation

____ ANNUAL FUND: ____ Unspecified ____ Specified, purpose of gift _____

____ CAPITAL: Building on the Experience

____ ENDOWMENT: ____ Unspecified ____ Faculty Salaries ____ Financial Aid ____ Foreign Travel ____ Technology/Library

Please specify if you wish to list your gift as: In Memory Of _____ or In Honor Of _____

This gift will be matched by (organization or company name) _____

Matching gift amount: _____

If your company will match this gift, please mail the company's information to: LWS Development Office, 42605 County Road 36, Steamboat Springs, Colorado 80487

Credit Card Information (*Visa, Mastercard, American Express, and Discover*)

Credit Card Number _____ Expiration Date _____ Card Type _____

I authorize The Lowell Whiteman School to process my credit card for the amount above.

Signature _____ Date _____

News that I/we would like to share with The Lowell Whiteman School Community:

Would you like to receive information regarding charitable contributions of stock? ____ Yes

Are you interested in including LWS in your will? ____ Yes, please send me more information on planned giving

After completing this form, please mail or fax to:

LWS Development Office, 42605 County Road 36, Steamboat Springs, CO 80487

Phone: 970-879-1350 x 28, FAX: 970-879-0506