

This form allows you make your gift to Guilford by check (via mail or fax) or by credit card.

Name: _____ Class(es) _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone Number: _____

E-mail address: _____

Check here if any of the above information is new

Please credit my/our gift to:

\$ _____ Loyalty Fund

\$ _____ Academic Area _____

(please write in one specific program)

\$ _____ Quaker Club

Athletic Team: _____

(50% of your Quaker Club gift may be designated to an athletic team)

\$ _____ Friends of the Library

\$ _____ Friends Center

Payment Option

My check is enclosed

Credit Card:

Visa MasterCard Discover American Express

Card Number: _____

Expiration Date: _____

Signature: _____

Please send me information about including Guilford College in my estate plans.

Do you or your spouse work for a matching gift company? Yes No

Company name: _____

Please mail a Matching Gift Form from the matching company with your gift.

Please print this form and mail to:

Guilford Annual Funds

Guilford College

5800 W. Friendly Avenue

Greensboro, NC 27410

Guilford Annual Funds Office - 336-316-2855

Guilford Annual Funds Fax - 336-316-2951