

My Gift Amount:

\$

DONOR NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

HOME PHONE: _____ EMAIL: _____

Yes, you may publish my name in any acknowledgement list.

No, I prefer to remain anonymous.

I prefer my name to be published in the following way: _____

My Payment Method:

Cash Check *made payable to FutureBuilders* Credit EFT

Please charge my gift to: Visa Master Card

Card Number _____ - _____ - _____ - _____

Expiration Date ____ - ____ (mm-yy) CVV# _____

Cardholder's Name (as it appears on the card) _____

Cardholder's Signature _____ Date _____

Please debit my checking or savings:

Routing Number _____ Checking Savings

Account Number _____

Name (as it appears on the account) _____

Signature _____ Date _____

Please attach copy of voided check to this form. Statements will reflect a charge from *FutureBuilders*

Commemorative, Living Tribute or Special Occasion Gifts:

Gifts may be made in memory of a family member or friend, in honor of an individual, or in recognition of a special occasion. We will be glad to notify the individual or their family.

This gift is: (List name of person to honor including prefix and relationship to Honoree)

IN MEMORY OF: _____ RELATIONSHIP: _____

IN HONOR OF: _____ RELATIONSHIP: _____

IN RECOGNITION OF: _____ RELATIONSHIP: _____

Person to be notified:

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ EMAIL: _____

801 50th Ave SW,
Moorhead MN 56560

(218) 477-6500
Fax: (218) 477-6501

trollwood@fargo.k12.nd.us
www.trollwood.org