

“Gift of Today” Commitment Form

Donor(s) Name(s) First	Middle	Last Name(s)	
Street Address	City	State	Zip Code
Home Phone	Cell Phone	Preferred E-mail Address	

Gift Selection:

- I/We would like to make a one-time gift valuing \$_____.
- I/We would like to make an annual gift valuing \$_____ per year. Please send a pledge reminder every year to fulfill this pledge in the month of _____.
- I/We would like to make a multi-year gift of \$_____ over _____ years. Please send reminder notices: Annually Semi-annually Quarterly Other _____.
- I/We would like to make a gift through EFT. The EFT form is enclosed.
- Yes, my employer, _____, matches my gift(s). A matching gift form is included.

Gift Designation

Southwest Tech Foundation Charger Annual Fund

In giving to the Southwest Tech Charger Annual Fund you will enable the Foundation and college leadership to use this gift for immediate and often unexpected needs for programs, projects, and expenses at Southwest Tech.

Southwest Tech Foundation Designated Funds

I/We would like our gift to be used for (check one or indicate percentage if gift is to be used for multiple areas):

- | | |
|--|--|
| <input type="checkbox"/> Scholarship(s)
Name: _____ | <input type="checkbox"/> Gas Card Fund |
| <input type="checkbox"/> Charger Dream Fund (financial emergency fund) | <input type="checkbox"/> Southwest Tech Scholarship for the (High School Name) _____ Community |
| <input type="checkbox"/> Program Support
Program: _____ | <input type="checkbox"/> Project Name: _____ |
| <input type="checkbox"/> Charger Cupboard (student food pantry) | <input type="checkbox"/> Giving Tree/Patio Paver: _____ |
| | <input type="checkbox"/> Other: _____ |

Gift is: In Memory of **or** In Honor of _____

Please provide address to send gift notification:

Name	Street Address	City	State	Zip Code
------	----------------	------	-------	----------

Recognition

Please indicate how you would like your name listed in our annual report if different than written above. If you wish the gift to be listed in honor/memory of someone, please give us the listing exactly as you like it to appear.

- List Gift as follows: _____
- I/We prefer to remain anonymous.

For payment by credit card, please print name as it appears on the card:

Name on card	Credit Card Number	Sec Code	Exp Date
--------------	--------------------	----------	----------

Please make check payable to Southwest Tech Foundation.

RETURN THIS FORM TO:

Southwest Tech Foundation,

1800 Bronson Boulevard, Fennimore, WI 53809

Questions? Please call the Southwest Tech Foundation at (608) 822-2348 or email foundation@swtc.edu