

MICDS

2024-2025 Reunion Gift Pledge Form

In honor of my reunion, I wish to support MICDS with a multi-year gift to:

- MICDS Fund Reunion Class Endowed Fund Other

PERSONAL INFORMATION

Name: _____ Class Year: _____

Home Address: _____

Phone: _____ Email: _____

PLEDGE INFORMATION

Yes, I want to support my class's Reunion Giving Goal with a contribution of:

- \$5,000 for 5 years, for a total of \$25,000
- \$2,500 for 5 years, for a total of \$12,500
- \$1,000 for 5 years, for a total of \$5,000
- \$500 for 5 years, for a total of \$2,500
- \$250 for 5 years, for a total of \$1,250
- \$100 for 5 years, for a total of \$500

Other giving options:

- \$_____ for 5 years, for a total of \$_____
- I wish to make a one-time pledge of \$_____ to be paid by June 30, 2025

PAYMENT INFORMATION

Select one:

- Enclosed is the first payment by check payable to MICDS
- I will make my first payment online at micds.org/give
- I will make my first payment with a gift of stock
- Charge my credit card:

Name as it appears on card Card Number Exp CVV Zip Code

Please sign and date: _____
Signature Date

ADDITIONAL GIFT INFORMATION

- This gift will be matched by my employer _____.
- I have included MICDS in my estate plans. Please send me information about planned giving.
- This gift is in honor of memory of: _____

WHY WAIT? GIVE TODAY! Make your gift online at www.micds.org/give or call to make gift: 314-995-7380.