

MARIA

COLLEGE

GIFT FORM

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Thank you for your gift to Maria College! Your contribution to the Maria Fund will support financial aid for needy students, make critical improvements to infrastructure and enhance selected co-curricular and service offerings. Generosity like yours helps to maintain our commitment to being the most affordable private college in the region.

DONOR INFORMATION

First Name: _____ Last Name: _____

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Home Phone: () _____ Cell Phone: () _____

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Relationship to college: Alumna/us Faculty/Staff Parent Student Friend

Class Year: _____ Program Major: _____

DONATION INFORMATION

Gift Amount: _____

Gift Designation (select one): The Maria Fund (where the need is greatest) Financial Aid Other _____

Please have someone from the college call me to discuss my gift.

I would like to include Maria College in my will.

My gift is a tribute to someone special.

In memory of _____ In honor of _____

Please provide information below if you would like us to notify someone of your tribute.

Name: _____

Address: _____

Matching Gift Information: Please consult with your employer's personnel or human resources office to determine if your employer will match your charitable contribution to Maria College.

PAYMENT INFORMATION

Check enclosed Visa/MC/Amex

Name as it appears on card: _____

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Signature: _____ Date: _____

Please complete and mail this form to: Maria College, Office of Development, 700 New Scotland Avenue, Albany, NY 12208
Questions? Please contact the development office at 518-861-2596. **Thank you for supporting Maria College!**