



**Monroe Community
College Foundation**

**2015-2016 ANNUAL FUND FOR MONROE COMMUNITY COLLEGE
GIFT/PLEDGE FORM**

YES! I want to help MCC students achieve their dreams of a high quality college education.

Name(s) _____

Address _____

City _____ State ____ Zip _____ Phone (____) _____

E-mail _____

Gift/pledge \$ _____

☐ Enclosed is a check made payable to the MCC Foundation

☐ I am an MCC faculty/staff member and wish to use payroll deduction to make my gift. I authorize MCC to make _____ (maximum of 24) deductions of \$ _____ from each paycheck beginning on _____.

Signature _____ Date _____

Please charge my ☐ Visa ☐ MasterCard

Is this a ☐ business or ☐ personal card?

Name as it appears on card _____

Account # _____ Expiration Date: _____

Signature _____

☐ Please bill me: ☐ Semi-annually ☐ Quarterly ☐ Monthly

Name as you would like to see it in print _____

Special instructions _____

☐ I wish to remain anonymous.

This is an honor/memorial for _____