

MAIL-IN-FORM

YES, I WANT TO LEAVE MY MARK!

Full Name: _____
Phone: _____ Email: _____
Address: _____
City: _____ State: _____ Zip: _____

I wish to make a gift of \$_____ \$1,000 \$500 \$250 \$100 \$50

I wish to donate \$_____ now and remit the balance in _____ monthly or _____ quarterly installments over the next _____ months.

PAY BY CHECK:

Make payment to Padua H.S. and mail to: Padua Franciscan High School, 6740 State Rd. Parma, OH 44134

CREDIT CARD:

To make your donation by credit card, go to PaduaFranciscan.com/Development.

Then indicate you have made your gift by credit card by checking the appropriate box at the bottom of this form.

APPLY MY GIFT TO:

- 50th Anniversary Academics Athletics Campus Ministry Endowment
 Facilities Financial Aid Fine Arts MedTrack Area of Greatest Need

- * I have made a gift of at least \$50; please include my name on the 50th anniversary commemorative installation (**sign your name in the space provided using heavy blue or black ink**). Note that gifts of \$500 or \$5,000 will result in a custom-designed inscription as described below, which may be used to honor your family or corporate sponsorship.

EXAMPLE

John Smith '01
— OR —
Cindy Jones

- * I have made a gift of at least \$500 (7" wide by 5" tall) or \$5,000 (14" wide by 11" tall). Please contact me at _____ to arrange for the inscription details.

Visit **PADUAFRANCISCAN.COM/50** to learn more about the plans for the anniversary celebration.

- No money is enclosed with this form as I wish to apply a previous gift of \$_____ made online during 2011.

*** Gifts of \$50 or more qualify for inclusion of your name on the 50th Anniversary plaque.**