



# THE KING'S COLLEGE

## MAIL IN GIFT FORM

Please print out this form, fill in the appropriate sections, and mail to: Office of Institutional Advancement  
The King's College  
350 Fifth Ave Suite 1501  
New York, NY 10118

Please enter the following identifying information. Items marked with an asterisk (\*) are required because without them we are unable to record your gift accurately.

Step 1: PERSONAL INFORMATION							
<b>Prefix:</b>	<input type="checkbox"/> Mr.	<input type="checkbox"/> Mrs.	<input type="checkbox"/> Ms.	<input type="checkbox"/> Dr.	<input type="checkbox"/> If Other, please specify:	<input type="text"/>	
<b>*First:</b>	<input type="text"/>	<b>Middle:</b>	<input type="text"/>	<b>*Last:</b>	<input type="text"/>	<b>Suffix:</b>	<input type="text"/>
<b>Maiden:</b>	<input type="text"/>						
If you are not an alumnus/a or parent of The King's College, please check here: <input type="checkbox"/>							

If you are an alumnus/a, please indicate the school with which you have been affiliated and the year of that affiliation. If you are a TKC parent, please indicate your child/children's year(s) and college(s).

<b>School/Class Affiliations:</b> Example: NBC 1966 or TKC 1999, or TKC NY 2004	<input type="text"/>
<b>Email address:</b> Please indicate an email address at which we can contact you	<input type="text"/>
<input type="checkbox"/> Please check here if you do not wish your email address to be entered into your TKC record	
<b>*Day Phone:</b>	<input type="text"/>

### Address Information

Please enter the address to which you wish your gift acknowledgment sent:

<b>*Address 1:</b>	<input type="text"/>						
<b>Address 2:</b>	<input type="text"/>						
<b>Address 3:</b>	<input type="text"/>						
<b>*City:</b>	<input type="text"/>	<b>*State:</b>	<input type="text"/>	<b>*Zip:</b>	<input type="text"/>	<b>Country:</b>	<input type="text"/>
<b>Which address is this?</b> <input type="checkbox"/> Home <input type="checkbox"/> Business							
<b>Check here if this is a new address:</b> <input type="checkbox"/>							

**STEP 2: YOUR GIFT**

Please indicate the amount of your gift below:

**\*Amount:**  
(Please indicate in US\$ only.)

\$

All gifts will be applied to the general operating fund of the college.

**STEP 3: PAYMENT INFORMATION AND AUTHORIZATION**

Indicate if you are paying by check or credit card:

*If you are paying by credit card, please enter your information below (we accept VISA or MasterCard):*

**\*Total amount to charge:**

\$

**\*Credit Card type:**
 MasterCard     VISA
**\*Credit Card Number:**

**\*Expiration Date:**
 MM  YY
**\*Name, as it appears on your card:**


*If there is any additional information we need in order to handle your gift properly, please provide it here:*

Do you work for a company that matches gifts to colleges?

 Yes     No

If "Yes," please enter the name of your company:

You can significantly increase your gift to The King's College by checking with your human resources office and sending the matching gift form to:

**The Office of Institutional Advancement  
The King's College  
350 Fifth Ave Suite 1501  
New York, NY 10118**

**Thank you for your support of The King's College.**

Within the next two weeks, once your check or credit card charge has been processed, you will receive by mail an acknowledgment of your contribution that you can save for your tax records.