

OFFICE OF INSTITUTIONAL ADVANCEMENT

4400 College Drive, Vernon, TX 76384

(940) 552-6291, ext. 2293

www.vernoncollege.edu

GIFT DONATION FORM

All gifts to the Vernon College Foundation and Vernon College are processed through the Office of Institutional Advancement.

If this is a gift of tangible assets, please complete the Gift-In-Kind Donation Form.

Date:		_		
Donor Name	:			
Address:				
S	treet	City	State	Zip Code
	If you are making a gift u	sing a check, please make yo Vernon College Found	001	ayable to the
Gift Amount	: \$	Check No.:	Date:	
Credit Card N	No:	CVV No	o: Expiration I	Date:
Name on Cre	edit Card:			
Gift Designat	tion:			
Special notes	/instructions about the gift:			
Γhis gift is in	honor/memory of:			
Please send h	nonor/memorial acknowled	gment to:		
Name:				
Address:				
	Street		City	State Zip Code
Donor may b	e listed in the annual Verno	on College Honor Roll of Do	onors? yes	no
Accepted on	behalf of Vernon College:	Signature of the President or Directo	r of Institutional Advancement	Date:
		Thank you so much for yo	our gift!	

If you have questions, please contact:

Michelle A. Alexander at malexander@vernoncollege.edu

501(c)3 nonprofit organization