

MAIL IN GIFT FORM

Please fill in the appropriate sections, print out this form, and mail to: Contribution Processing
Yale University
P.O. Box 2038
New Haven, CT 06521-2038

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							
Prefix:	Mr. Mrs. Ms. Dr. If Other, Please Specify: _____						
*First:		Middle: (or Name When Enrolled at Yale)		*Last:		Suffix:	
If you are not a Yale alumnus/a or parent, please check here:							

If you are a Yale alumnus/a, please indicate at least one school with which you have been affiliated and the year or department of that affiliation. Yale College alumni/ae, please indicate your residential college. If you are a Yale parent, please indicate your child/children's year(s) and college(s).

School/Class Affiliation(s): <i>e.g., Yale College, 1965 Branford or Graduate School History or Parent 2003 JE</i>	
*Email address: <i>Please indicate an email address at which we can contact you.</i>	
	Please check here if you do not wish your email address to be entered in your Yale record.
*Day Phone:	

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

Address 1:							
Address 2:							
Address 3:							
City:		State:		Zip:		Country:	
Which address is this?:	Home Business						
Check here if this is a new address:							

Donors may make a gift to many different schools and/or departments at Yale.
Please indicate your preferences and the amount of your gift below.

*Choose a school or other area to which to direct your gift:		
Amount: (Please indicate in US\$ only.) Indicate the amount(s) you would like to give to one or more of the purposes for each School/Area, such as alumni fund/ financial aid, etc.	AMOUNT	PURPOSE
	\$ \$ \$ \$ \$	
	Other: _____ Please Specify: _____	
If this gift is to the Graduate School, please indicate the department here:		

Additional Gift #1

*Choose a school or other area to which to direct your gift:		
Amount: (Please indicate in US\$ only.) Indicate the amount(s) you would like to give to one or more of the purposes for each School/Area, such as alumni fund/ financial aid, etc.	AMOUNT	PURPOSE
	\$ \$ \$ \$ \$	
	Other: _____ Please Specify: _____	
If this gift is to the Graduate School, please indicate the department here:		

Additional Gift #2

*Choose a school or other area to which to direct your gift:		
Amount: (Please indicate in US\$ only.) Indicate the amount(s) you would like to give to one or more of the purposes for each School/Area, such as alumni fund/ financial aid, etc.	AMOUNT	PURPOSE
	\$ \$ \$ \$ \$	
	Other: _____ Please Specify: _____	
If this gift is to the Graduate School, please indicate the department here:		

STEP 3: PAYMENT INFORMATION AND AUTHORIZATION

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Indicate if you are paying
by check or credit card:

Check

Credit Card

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

Total amount to charge:

\$

*Credit Card type:

(please check one)

American Express

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 universities?

Yes

No

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

You can significantly increase your gift to Yale by checking with your
human resources office and sending the matching gift form to:**Matching Gifts Department
Yale Office of Development
Box 2038 Yale Station
New Haven, CT 06521-2038**

Thank you for your support of Yale.

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