

Yes, I want to help by making a gift or pledge!		
Gift amount \$		
Name	Class Year	
Spouse (if applicable)	Class Year	
Mailing Address		_
Phone	Business Phone Home	
E-mail Address		
Payment Options:		
Bill me:Quarterly Semi-anr	nually Annually	
Please charge myVISAMasterca	ardDiscoverAmeric	an Express
Account Number	Expiration Date	
Signature		
Please make checks payable to: UVA Wise Foundation		
Membership in the Philanthropist Society is offered to th • Included the College in their will. • Named the College as a beneficiary of life insur	-	

- Made a gift to the College of paid-up life insurance.
- Deeded property to the College while retaining use of the property for their lifetime.

Please send me information on making a gift of: \_\_\_\_ Securities \_\_\_\_ Life Insurance \_\_\_\_ Real Estate

Please send me information on making a planned gift.

I would like to discuss making a bequest to UVA Wise. Please call me.

For more information on becoming a member of the Philanthropist Society, please visit <u>https://www.uvawise.edu/advancement/ways-give/planned-giving</u> Questions or concerns? Call 276-328-0129 or e-mail <u>plannedgiving@uvawise.edu</u>