

2023-2024 MICDS Reunion Giving Pledge Form

In honor of my reunion, I wish to support MICDS with a multi-year gift to:

□ MICDS Fund		☐ Reunion Class Endowed Fund	□ Other	
Pledge Total:	ge Total: \$		Select one:	
Schedule:	\$	_ paid by June 30, 2024	☐ Charge my credit card annually	
	\$	_ paid by June 30, 2025	□ Send me pledge reminders	
	\$	_ paid by June 30, 2026		
	\$	_ paid by June 30, 2027		
	\$	_ paid by June 30, 2028		
l'd like to mak	ce a one-time	gift of \$		
This gift is in	\square honor of	☐ memory of:		
Payment lı	nformatio	 n		
□ I will make m	ny first payme ny first payme	ent by check payable to MICDS ent online at micds.org/give ent with a gift of stock		
Name as it appears on card		Card Number	Expiration Date	Zip Code
Please sign ar	nd date:			
Signature		Date		
Name				
Preferred First	Name			
Home Address				
Telephone(s)				
Email(s)				

WHY WAIT? GIVE TODAY! Make your gift online at www.micds.org/give or call your gift in to 314-995-7380.