



MEMORIAL/HONORARY GIFT

I/we would like to make a special gift to the Gloucester Education Foundation

O in honor of _____

O in memory of _____

Please notify the following of this donation (attach separate sheet for multiple names):

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Check enclosed (payable to Gloucester Education Foundation)

Charge my credit card

Card Number: _____

Expiration Date: __ __/__ __ CVV Code _____

Name as it appears on card: _____

Your signature: _____

Name as you would like it to appear in the GEF Annual report:

I/we wish to remain anonymous

Name: _____

Address _____

City _____ State _____ Zip _____

Telephone: _____ E-Mail* _____

**On occasion, GEF sends emails with news and notices of events. GEF never distributes e-mails to anyone outside of our organization.*

Thank you for your contribution. Please mail this form with your donation to
Gloucester Education Foundation, P.O. Box 1104, Gloucester, MA 01931.