



PRINT AND MAIL TO:
St. Francis de Sales High School
Alumni Office
10155 S. Ewing Avenue
Chicago, IL 60617

www.sfdshs.org

Name _____ Class _____

Address _____

City, State, Zip _____

Email address _____ Phone number _____

I want to make an immediate difference at St. Francis de Sales with my gift of:

___ \$100 ___ \$250 ___ \$500 ___ \$1000 ___ \$2500 ___ \$5000 ___ \$10,000 Other \$___

I would like to make a 3 Year Pledge of

___ \$10,000 ___ \$5000 ___ \$2,500 ___ \$1,000 ___ \$500 ___ \$250 Other \$___

Signature _____

Date _____

___ Please send me reminders.

___ Please do not send me reminders.

___ My employer matches gifts. Enclosed are the appropriate forms.*

Make checks payable to: St. Francis de Sales High School

___ **VISA** ___ **MASTERCARD**

Card Number: _____ **Exp Date** _____

Signature: _____

Giving Club Levels:

Cornerstone \$1000 or more
St. Francis de Sales Society - \$500 - \$999
Pioneer Club \$250 - \$499
Blue & Gold Club \$100 - \$249

Please contact me to discuss:

___ Making an in-kind donation.
___ Making a gift of stock
___ Restricted donations for special projects
___ Naming St. Francis de Sales in my will.

**Many corporations match their employees' charitable contributions. Check with your human resources department for information.*