



Giving Form

Contact information:

Name (s): _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Home Phone: _____

Email: _____

Please direct my/our gift to:

Beloit College Annual Fund

Other: _____

This gift, in the amount of \$_____, will be made:

with the enclosed check payable to Beloit College

This gift will be matched by my employer: _____

Please mail checks to:

Beloit College
Box 45
700 College St.
Beloit, WI 53511

Credit/debit card gifts (including monthly/recurring) may be made by calling 800-331-4943.