

# GIFTS TO LONGY

Thank you for your gift to the Longy School of Music of Bard College!

## Personal Information

Salutation  Mr. and Mrs.  Mr.  Mrs.  Ms.  Dr.  Other (please specify) \_\_\_\_\_

Name(s) \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_

E-mail \_\_\_\_\_

## Gift Information

I/we would like to support this valuable community resource with a tax deductible gift of:

\$50  \$100  \$250  \$500  \$1,000  \$2,500  \$5,000 Other (please specify) \_\_\_\_\_

I/we would like to contribute anonymously \_\_\_\_\_

I/we would like to give in memory/honor of \_\_\_\_\_

My employer will match this gift (name of employer) \_\_\_\_\_

I would like more information about:

Benefits of becoming a Georges Longy Circle Member

Establishing a Scholarship Fund

Providing for Longy in my will, life insurance policy, retirement plan or with a gift of stock

Volunteer opportunities

## Payment Information

My check is enclosed (payable to Longy School of Music of Bard College)

Charge my:  VISA  MasterCard

Account No. \_\_\_\_\_ Expiration Date \_\_\_\_\_

Please print name as it appears on the card \_\_\_\_\_ Security Code \_\_\_\_\_

Signature \_\_\_\_\_

**Please return completed form to:**

Longy School of Music of Bard College | Institutional Advancement | 27 Garden Street | Cambridge, MA 02138