

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

Home Cell

Email _____

Home Work

I want to help students with a gift to MNU!

\$100 \$50 \$25 Other \$ _____

Use my gift to benefit

Where needed most (University Fund)
 General Student Scholarships (University Fund Scholarships)
 Other _____

Payment Options

Check (payable to MNU Foundation)

Mail to: MidAmerica Nazarene University
Office of University Advancement
2030 E. College Way | Olathe, KS 66062-1899

One-time **gift on credit/debit card** (enter information below)

Recurring/monthly gift on credit/debit card
(complete "Monthly Giving Option" and credit card sections)

Credit/Debit Card Information

VISA MasterCard Discover American Express

CREDIT CARD NO. _____ EXP. DATE _____

NAME ON CARD _____ DAYTIME PHONE _____

SIGNATURE _____

Monthly Giving Option (choose one)

I want to join the University Club with a monthly credit/debit card gift of \$83.34 per month for 12 months (\$1,000 total).

Please process my monthly debit/credit card gift of \$ _____ per month for _____ months.

Please process my monthly debit/credit card gift of \$ _____ per month until I notify MNU otherwise.
Transactions will occur on the 25th of each month.

Matching Gifts

My gift will be matched by _____

Visit www.mnu.edu/making-a-gift to learn if your employer or your spouse's employer has a matching gift program.

Financial Planning

I/we have included MNU in my/our estate plans.
 Please send information about estate and gift planning.