

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Home/Cell/Wk Phone \_\_\_\_\_

Email \_\_\_\_\_

**Please check all that apply:**

- Current MIS Parent     Current MIS Grandparent  
 Alumnus, Class of \_\_\_\_\_  Faculty/Staff  
 Alumni Parent (Please list children and class years) \_\_\_\_\_  
\_\_\_\_\_  
 Other \_\_\_\_\_

**SHOW YOUR  AND MAKE A GIFT TO MIS**

**Count on my tax deductible support for MIS for the year 20\_\_\_\_\_ to be fulfilled by the last day of the school year.**

Total Gift Pledged \$\_\_\_\_\_ Amount Paid Now \$\_\_\_\_\_

Payment:     Pay online at [www.mischool.org/pages/Annual\\_Giving](http://www.mischool.org/pages/Annual_Giving)  
               Check Enclosed     Visa     MasterCard     Discover

Note that the school must pay a processing fee on credit cards.

Please make checks payable to Mary Immaculate School.

\_\_\_\_\_  
*Credit Card Acct #*

\_\_\_\_\_  
*Expiration Date*

\_\_\_\_\_  
*Signature*

My credit card should be billed:     Monthly     Quarterly     Yearly

My company, \_\_\_\_\_, will match my gift.

Phone # \_\_\_\_\_ Website \_\_\_\_\_

I am interested in receiving information about bequests/wills.

**In lieu of a monetary gift at this time, I pledge this gift of prayer:**

Once a week, I will pray a special prayer intention for MIS by  
    \_\_\_ attending an extra mass    \_\_\_ praying the rosary  
    \_\_\_ attending Adoration.

**Mary Immaculate School  
Annual Giving Campaign**

[www.mischool.org](http://www.mischool.org) • 972-243-7105