



CASH CONTRIBUTION FORM

DONOR INFORMATION

Today's Date: _____

Name: _____ Company Name (if applicable): _____

Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Your relationship to us:

☐ Alumni ☐ Retiree ☐ Employee ☐ Former Employee ☐ Other: _____

GIFT DESIGNATION (Your gifts are 100% tax deductible!)

Please designate my gift to:

☐ Ridgewater Cares / Unrestricted (use where it's needed most)

☐ General Scholarships

☐ Named scholarship
fund: _____

☐ Specific program / department: _____

My gift is:

☐ in honor of: _____

☐ in memory of _____

☐ Name of family to be notified of gift*: _____

☐ Address of family to be notified of gift*: _____

*Gift amount **will not** be disclosed to family notified

PAYMENT INFORMATION

Gift Amount:

____\$25 ____\$50 ____\$100 ____\$250 ____\$500 ____\$1,000 Other: \$_____

☐ Enclosed is my check # _____ payable to **Ridgewater College Foundation**.

☐ My company (or my spouse's company) will match. The matching gift form is enclosed.

☐ My gift is to remain anonymous. (All donor names will be listed in the Annual Report unless checked).

MORE INFORMATION

- If you would like to set up a monthly/quarterly/yearly electronic payment from your checking/savings account please email foundation@ridgewater.edu or call 320-222-6095
- For more ways to give please visit: <https://www.ridgewater.edu/ways-to-give/>

ARE YOU A RIDGEWATER COLLEGE ALUM?

Share your alumni story at: www.ridgewater.edu/AlumniStory

Your story is essential in telling the Ridgewater story. Thank you for taking the time to share your Ridgewater experience with us!