

College of **Health & Human Sciences**
Colorado State University

College of Health and Human Sciences Gift Form

Enclosed is my/our check for a gift of:

\$1,870 \$500 \$250 \$100 Other \$ _____

(Payable to Colorado State University Foundation)

Name _____

This gift is from me my spouse & me my partner & me.

Spouse's/Partner's Full Name _____

Address _____

City, State, ZIP _____

Home Phone (_____) _____

E-mail _____ Home Work

A matching gift form is enclosed.

Please send information on becoming a member of the 1870 Club, CSU's most prestigious annual gift club, which recognizes donors who give \$1,870 or more each year.

Make a gift online at advancing.colostate.edu/CHHS.

Charge this gift of \$ _____ to my/our

VISA MasterCard American Express

Card Number _____

Expires ____/____(mm/yy) Card Security Code _____

Name on Card _____

Signature _____

I have included the College of Health and Human Sciences in my will or estate plan.

Please apply this gift to:

- \$ _____ HHS Enrichment – 12192
- \$ _____ HHS Students First Scholarship – 17615
- \$ _____ Construction Management – 11593
- \$ _____ Design and Merchandising – 14293
- \$ _____ Food Science and Human Nutrition – 13313
- \$ _____ Health and Exercise Science – 12543
- \$ _____ Human Development & Family Studies – 13243
- \$ _____ Occupational Therapy – 12983
- \$ _____ School of Education – 13473
- \$ _____ School of Social Work – 12553
- \$ _____ Family and Consumer Sciences – 40975
- \$ _____ Other _____

(College, department, or fund name)

Questions? Please contact:

Kim Winger, Development Director
 College of Health and Human Sciences
 Colorado State University
 1501 Campus Delivery
 Fort Collins, CO 80523-1501
 Kim.Winger@colostate.edu | (970) 491-2797

Please return this form to:

Colorado State University Foundation
 P.O. Box 1870
 Fort Collins, CO 80522-1870