

Yes, I want to inspire girls to be **strong, smart, and boldSM** by making a gift today!

Contact Information

Name _____

Spouse/Partner Name _____

Address _____

City, State, Zip _____

Phone _____ HOME CELL

Email _____



Employer Information

Your Employer

Spouse/Partner Employer

Name _____

Name _____

Address _____

Address _____

Phone _____

Phone _____

Email _____

Email _____

My employer will match this gift.

My spouse/partner's employer will match this gift.

Please enclose matching gift form or contact your Human Resources office for more information.

Gift Information-one time gift or monthly gift

One time gift of \$ _____

Monthly gift of \$ _____

I am enclosing a check payable to Girls Inc.

Please charge the amount above to my credit card

Please charge the amount above to my credit card every month

Card Number _____

Card Number _____

Security Code _____

Security Code _____

Expiration Date _____

Expiration Date _____

Visa American Express

Visa American Express

MasterCard Discover

MasterCard Discover

This gift is in honor/memory of: _____

Please acknowledge (include name & address) _____

I would like more information on planned giving options, including gifts of retirement plans, remainder interest in property, bequests and others.

Thank You!