

DONATION / SUBSCRIPTION MAIL-IN FORM

Full Name: _____ Membership # _____

Mailing Address: _____

City, State, Zip: _____

Contact Phone: _____ Email: _____

Donation: I wish to donate to the Forever Dollars Scholarship Fund. I understand that each dollar contributed adds to the principal and only the earnings are used to help support outstanding business students for generations to come. The Delta Mu Delta Society is tax exempt under Section 501(c)(3) of the U.S. Internal Revenue Code and thus charitable donations are deductible to the full extent allowed by law.

Vision Hardcopy: I wish to receive hard copy in the mail for next year.

Vision Email: I wish to continue to receive notifications via the above email address.

Employer Match: I have included the matching donation form of my employer in this envelope.

Vision Subscription:

The next three years of hard copy to my mailbox - Enclosed is my \$27 payment.

A lifetime subscription of hard copy to my mailbox - Enclosed is my \$195 payment.

Donation and/or Subscription Payment: Check enclosed. **Charge:** Mastercard Visa AMEX Discover

Amount: \$ _____ Card #: _____ Exp. Date: _____

Credit Card Billing Address if different from above Mailing Address:

Name: _____

Address: _____

City, State, Zip: _____

Card Holder Signature: _____

The Forever Dollars Scholarship Program grows through the support of kind and thoughtful gifts from members like you. Thank you!

Please mail to:

**Delta Mu Delta Honor Society
9217 Broadway Avenue
Brookfield IL 60513-1251**