

Donation Form

The SWWC Foundation is a 501©3 public charity.
All donations are tax deductible to the extent allowed
by law and will generate a charitable gift receipt.

Tell Us About You

Title: Dr. Mr. Mrs. Ms.

First Name:

MI:

Last Name:

Home Address:

City/State/Zip:

Employer:

Work Phone:

Preferred Email Address:

Mobile Phone:

- ☐ Please list me/us in recognition materials as
- ☐ I/We would like to remain anonymous.

Donation Options

Recurring Contribution

- ☐ \$250/month ☐ \$100/month ☐ \$50/month ☐ \$20/month ☐ \$10/month ☐ Other \$____/month

One-Time Contribution

- ☐ \$1,000 ☐ \$500 ☐ \$250 ☐ \$100 ☐ \$50 ☐ \$20 ☐ Other \$_____

- ☐ Cash/Check: Make check payable to SWWC Foundation for Innovation in Education
- ☐ Credit/Debit Card: Donate online at www.swwc.org/foundation/donate

Optional

I would like my donation directed to the following:

- ☐ Student Enrichment
- ☐ Educational Learning Center
- ☐ The READY Clinic
- ☐ Greatest Need

Please mail completed form to SWWC Foundation for Innovation in Education, 100 London Road, Marshall, MN 56258 or email completed form to shelly.maes@swwc.org.