



WE INVITE YOU TO BECOME A FOUNDING SUPPORTER OF
FRIENDS OF WYCLIFFE HALL, OXFORD

I/we would like to make a gift/pledge of

\$5,000

\$1,000

\$2,500

\$500

I /we would like to make a gift/pledge of \$ _____.

Name _____

Street Address _____

City _____ State _____ Zip _____

Daytime Phone _____ E-mail _____

Please make checks payable to Friends of Wycliffe Hall, Oxford

Friends of Wycliffe Hall is a registered 501 (c) (3) charity, and all donations are tax-deductible.

Credit card donation amount: \$ _____

Name on card: _____

Billing address (if different from above)

Street Address _____

City _____ State _____ Zip _____

Visa MC Am Ex

Acct. Number

Exp. Date __ / __

Security Code (3-4 digits) _____

Signature _____

Friends of Wycliffe Hall, Oxford
707 Nicolet Ave., Suite 100 Winter Park, FL 32789