

NMMI Foundation, Inc.



Please mail completed form to:
NMMI Foundation, Inc., 101 West College Boulevard, Roswell, NM 88201
Credit card gifts may be faxed to: 575.624.8037 or
go online to www.nmmi.edu/foundation

DONOR INFORMATION: *(Please print)*

Date: _____

Mr. Mrs. Mr. and Mrs. Other _____

Phone: _____

Name: _____

Email: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Enclosed is my gift of \$ _____ This is a one-time gift

This is a recurring gift beginning _____ and ending _____

Monthly Quarterly Annually

CONTRIBUTION METHOD:

Enclosed is my check *(Please make checks payable to NMMI Foundation, Inc.)*

Charge my credit card: MasterCard Visa American Express Discover

Name as it appears on credit card: _____

Credit Card Number: _____ CVV Number*: _____

(*The CVV is a 3 or 4 digit number on the back of most credit cards (it is on the front of the American Express.)

Authorized Signature: _____ Expiration Date: _____

COMMEMORATIVE GIFTS:

In memory of In honor of

Honoree: _____

Send gift notification to: _____

Relation to the Honoree: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____