

Yes, I'd like to help:

- \$8,500 for all classes for a year
- \$1,500 for a class of 12 girls for a year
- \$600 for half a class for a year
- \$100 for one girl for a year
- _____ Any amount makes a big difference!
- I'd like to contribute \$_____ to the Friends of Guéoul Endowment Fund.
- Make my gift a monthly pledge of \$_____.

Please make checks payable to Friends of Guéoul. If you have chosen to make yours a monthly gift, please include a voided check. All owners of the account must sign below.

Your Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ E-mail: _____

Optional:

This gift is in honor of memory of _____

If you'd like us to send an acknowledgment card to your honoree, please provide their contact information here:

Honoree's Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ E-mail: _____

Required for monthly gifts:

I (we) hereby authorize Friends of Guéoul to initiate monthly debit entries to my (our) checking or savings account (select one) indicated in the enclosed voided check. This authorization is to remain in full force and effect until Friends of Guéoul has received written notification from me (or either of us) of its termination.

Indicate amount per month: \$10.00 \$20.00 \$50.00 \$100.00 Surprise us! \$ _____

Accountholder(s) Signature(s): _____

Accountholder(s) Signature(s): _____

Please mail to:

Friends of Guéoul, Inc.
3120 South Race Street
Englewood, Colorado 80113
www.gueoul.org
303-788-1716

