



2020 EMERGENCY FUND DONATION

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Name at Hunter \_\_\_\_\_  
Email \_\_\_\_\_ Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

**I/We hereby agree to make a commitment to Hunter College High School Alumnae/i Association:**

**My total gift is in the amount of \$ \_\_\_\_\_**

- Payment will be made as a one-time gift
- Payments will be made as a recurring monthly gift
- My gift may be eligible for a corporate match.

Name as it should appear in print \_\_\_\_\_  My gift is anonymous

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PAYMENT:**

Gifts may be paid by check, credit card, or with gifts of securities. Your gift is tax-deductible to the extent allowed by law. If you would like to make your gift online, please visit:

<https://www.hchsaa.org/hunteritstrong>

- I am paying by check (payable to Hunter College High School Alumnae/i Association)
- I am paying by credit card. I authorize the HCHSAA to charge my  AMEX  VISA  MC  Discover

Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name as appears on your card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Thank you for your generosity and support. Please return completed form to:**

HCHSAA Emergency Fund  
Hunter College East, Room 1313B  
695 Park Avenue  
New York, NY 10065