



INDIANA WOMEN'S EDUCATION FOUNDATION, INC.
Individual Contribution Form

Please Print or Type:

I (We) wish to make a contribution of \$_____ to the Indiana Women's Education Foundation, Inc.

signature

address

city, state, zip

Local Organization _____ (credit will also be given to local)

District # _____ (credit will also be given to district)

Please credit this contribution to:

- General Fund: Promotes the mission and guarantees the future of the Foundation
- The Conni Richards Youth Fund: Honors the memory of a charter trustee by supporting projects that help young people
- Scholarship Fund: Promotes educational opportunities for women and young people in the state of Indiana
- Dr. Bertha Beazley Scholarship Fund: Honors the memory of Dr. Bertha Beazley, a 50+ year BPW member by giving scholarships to Indiana women pursuing post-secondary education in the medical field
- Girl Scout Patch Scholarship Fund: Honors girls who have earned the BPW Patch while in the Girl Scouting program
- Lynn Rhoades Memorial Scholarship Fund: Honors the memory of Lynn by establishing a scholarship for women in the accounting field
- Teaching Indiana's Future Scholarship Fundraising: Honors Beverly Radeline, a 30+ year retired teacher of Middle School English for the Baugo School Corporation by establishing a scholarship for women during their student teaching year
- Named Fund: \$5000 minimum contribution to establish fund + 10% administrative fee

Honorariums/Memorials

This gift is in loving memory of _____

This gift is in honor of _____

Please send acknowledgment of gift to: _____

Address _____

City, State, Zip _____

MAKE CHECK PAYABLE TO: INDIANA WOMEN'S EDUCATION FOUNDATION, INC.

We accept credit cards for contributions of \$25 or more.

Master Card _____ Visa _____

Card Number _____

Expiration Date: _____ Security ID _____

Your check will serve as your receipt for amounts less than \$25.

ALL CONTRIBUTIONS TO THE INDIANA WOMEN'S EDUCATION FOUNDATION, INC. ARE TAX-DEDUCTIBLE TO THE EXTENT ALLOWABLE BY LAW.

If your employer has a matching contribution form, please attach the matching contribution form available through your Human Resources representative.

SEND FORM AND CONTRIBUTION TO:
INDIANA WOMEN'S EDUCATION FOUNDATION, INC.
510 E. Silver St., KNIGHTSTOWN, IN 46148