



Vermont Institute of Natural Science

Motivating Individuals and Communities to Care for the Environment

GIFT FORM

Name _____

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City _____ State _____ Zip _____

Email: _____ Telephone: _____

I would like my/our name to appear in the Annual Report as:

- I would like to make a gift in the amount of:
- \$2,500 \$1,500 \$1,000 \$500 \$250 \$100 Other: \$ _____

Check enclosed (Please make payable to "VINS")

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Card#: _____ Expiration date: _____

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- I would like to have a **monthly gift** to VINS charged to my credit/debit card in the amount of \$ _____ (minimum \$15). I understand that I can cancel the monthly donation at any time by contacting VINS. My credit card information appears above.

I have made a bequest to VINS.

My employer has a matching gift program.

I have a question about making a gift to VINS; please contact me.

This is a memorial or commemorative gift in honor of: _____

Please return this gift form to:

The Vermont Institute of Natural Science
P.O. Box 1281
Quechee, VT 05059

Thank you for your support!