Rotary THE ROTARY FOUNDATION CONTRIBUTION FORM

Contributions can also be made at www.rotary.org/give.

1. DONOR OF CONTRIBUTION

Type of Donor (Check one): ☐ Individual ☐ Rotary club ☐ Rotaract/Interact club ☐ District ☐ Business
☐ Charitable organization/Foundation ☐ Other: _____

Name: _____ Donor ID: _____

Club Name: _____ Club No: _____ District No: _____

Billing Address: _____ City: _____ State/Province: _____

Country: _____ Postal Code: _____

Daytime Phone: _____ Email Address: _____

2. DESIGNATION/PURPOSE (Check one):

NOTE: Changes to designation can only be requested within 90 days of gift receipt date within current Rotary year.

☐ Annual Fund — SHARE ☐ Endowment Fund — World Fund ☐ Endowment Fund — Rotary Peace Centers
☐ PolioPlus Fund ☐ Endowment Fund — SHARE ☐ Other _____
☐ Approved Foundation grant _____ (number mandatory)

3. CONTRIBUTION DETAILS

Amount of contribution _____ **Currency** _____

Type of Payment: (Check one). **For security purposes, please do not send credit card contributions via email.**

Credit card: ☐ Visa ☐ MasterCard ☐ Diners Club ☐ JCB ☐ American Express

Make this a recurring contribution: ☐ Monthly ☐ Quarterly ☐ Annually (Select month) _____

Card Number

Expiration Date: _____ CVN*: _____

Name as it appears on credit card: _____ Signature: _____

☐ **Check** — Payable to "The Rotary Foundation." Check number _____

☐ **Wire transfer** Date initiated _____ (Please send completed contribution form as soon as possible after initiating a wire transfer.)

*The card verification number, or CVN, is a three-digit number that appears on the back of your credit or debit card; for AMEX, it is a four-digit number on the front of the card. It typically appears following the digits of your credit card number.

4. SHIPPING INFORMATION — Recognition materials only

If recognition materials from this contribution are requested for individual(s) other than donor, please complete the Paul Harris Fellow Recognition Transfer Request Form.

Presentation Date: _____ ☐ Please do **not** send recognition ☐ Please keep my gift anonymous

Send recognition to: (Check one; if left blank, recognition will be sent to club president)

☐ Club President ☐ Club Secretary ☐ Club Treasurer ☐ Club Foundation Chair ☐ Other, record information below

Name: _____ Address: _____

City, State/Prov.: _____ Country, Postal Code: _____

Daytime Phone: _____ Email Address: _____

5. INDIVIDUAL COMPLETING THIS FORM (if other than donor)

Name: _____ Daytime Phone: _____

Email Address: _____ Date: _____

Please send your completed form with contribution only once.

Mail: The Rotary Foundation, 14280 Collections Center Drive, Chicago, IL 60693, USA (Canada: The Rotary Foundation (Canada) c/o 911600, PO Box 4090 STN A, Toronto, ON M5W 0E9, Canada). **Email:** contact.center@rotary.org. **Fax:** +1-847-328-5260. For more information, or to make a contribution by phone: 1-866-9ROTARY (1-866-976-8279). Or contact the Rotary International office that serves your area. The contribution amount may not include the value of any goods or services given to an individual donor in consideration for this contribution.