

Gift information

Please allocate my gift to:

- McGill's Greatest needs (00100) The McGill Library (02119)
 Athletics (02121) Scholarships and Student Aid (02100)
 Faculty/School of _____ Other _____

I am pleased to make a gift of:

- \$5,000 US Other \$ _____ US
Payment frequency: Monthly Quarterly Annually
Start: _____ (DD/MM/YY)
End: Until further notice OR _____ (DD/MM/YY)

I have enclosed a cheque payable to McGill University.

You may charge my credit card:

- Visa Mastercard AmEx

Card number _____ Expiry ____ / ____

Full name on card _____

Signature _____

For more information on McGill's Parents Leadership Council, or to make a gift, please contact: **Joanna Gottlieb** | joanna.gottlieb@mcgill.ca | **514.398.1897**

Do you consent to have your name and current support publicly recognized on McGill's online donor wall, as described below? Yes No

Subject to your ongoing positive consent, to publicly recognize your financial support to McGill, the University would like to include your name and donation level in McGill donor listings, including McGill's online listings. Such listings are by giving ranges (not specific gift amounts) and recognize consistent support.



**PARENTS
Leadership
COUNCIL**

Join McGill's Parents Leadership Council and seize an opportunity to make a meaningful impact at the University.

Exclusive programming

- > Bi-annual Parents Leadership Council events
- > Dedicated parent programming during McGill Homecoming, such as master classes, special events with University leaders, and networking opportunities

Like-minded community

Your involvement on the Council will connect you to a vibrant international community of like-minded parents and will ultimately provide a deeper understanding of the McGill student experience.

Philanthropic leadership

Members of the Parents Leadership Council are requested to support McGill at a giving level of \$5,000 US per year. As a parent of a current McGill student, your gift is tax-deductible in the United States.

Yes, I am pleased to become a member of McGill's Parents Leadership Council.

Parent 1

Salutation ____ Full name _____

Email _____ Phone _____

Address _____

City _____ State ____ Zip code _____

McGill Alumni info. (if applicable): Degree _____ Year _____

Parent 2 (if applicable)

Salutation ____ Full name _____

Email _____ Phone _____

Check if mailing address is the same as Parent 1

Address _____

City _____ State ____ Zip code _____

McGill Alumni info. (if applicable): Degree _____ Year _____

Please turn over >

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If you prefer to make your gift online, visit mcgill.ca/give