WashU

Contact Information

Name _____

Preferred Address _____

City _____ State _____ ZIP _____

Preferred Phone _____

☐ Home ☐ Mobile ☐ Business

Preferred Email _____

My affiliation with Washington University in St. Louis:

- ☐ WashU alumnus/alumna
- ☐ WashU faculty/staff
- ☐ WashU parent/former parent
- ☐ WashU student
- ☐ WashU friend

☐ My gift will be matched by_____

*Visit **giving.washu.edu/corporate** to see if your company matches gifts.*

☐ I prefer no Honor Roll listing.

☐ My gift should be credited to both my spouse/partner and me.

Spouse/partner's name_____

☐ My gift is ☐ in honor of: ☐ in memory of:

_____

Name and address of person to be notified:

_____

_____

☐ I intend to recommend this gift via a donor-advised fund.

Name of fund_____

☐ I intend to recommend this gift via a family foundation.

Name of foundation _____

**If your gift or pledge will be paid from a donor-advised fund or private foundation, your commitment will be an "intention" and not a legally binding pledge.*

Please contact me:

- ☐ I am interested in gift planning options for my family and WashU.
- ☐ I have included WashU in my estate plans.
- ☐ I would like a gift officer to contact me about giving options.
- ☐ I would like to learn more about volunteer opportunities.

*Please see **alumni.washu.edu/volunteer** for more information.*

To make a gift:

Mail
Return this form to:
MSC 1082-414-2555
Washington University in St. Louis
1 Brookings Drive
St. Louis, MO 63130-9989

Call
877-215-2727
Monday–Friday, 8:30 a.m.–5 p.m. CT

Online
Make a secure gift online:
gifts.washu.edu

My Gift

Check

☐ My one-time gift of $ _____ is enclosed.

Please make checks payable to Washington University in St. Louis.

☐ I pledge* a total of $ _____.

My first ☐ annual ☐ monthly payment of $ _____ is enclosed.

Credit Card

☐ Please charge my one-time gift of $ _____ to my card listed below.

☐ I pledge* a total of $ _____.

Please charge my first payment of $ _____ and all equal remaining payments as follows:

☐ Annually ☐ Monthly

☐ I will make a recurring credit card gift as follows until canceled**:

$ _____ ☐ Annually ☐ Monthly

***You can change or discontinue your recurring gift at any time by contacting University Advancement at 877-215-2727 (option 3) or annualfund@wustl.edu.*

Credit Card Information

☐ Amex ☐ Discover ☐ Mastercard ☐ Visa

Account No. _____ Exp. Date ____ CVV # _____

Name on Card _____

Please print.

Signature _____

Please direct my gift to: (designate one or more gift options)

- ☐ WashU Annual Fund
- ☐ WashU Undergraduate Scholarships
  Name of annual scholarship ($10,000 per year or more):
  _____
- ☐ Other _____

I authorize the university to use my gift for purposes that the university reasonably determines will best align with and support the above-stated designation.

Annual Fund Recognition Levels

Danforth Circle	
Chair Level	$100,000 or more
Chancellor's Level	$50,000–99,999
Dean's Level	$25,000–49,999
Eliot Society Patron	$10,000–24,999
Eliot Society Benefactor	$5,000–9,999
Eliot Society Fellow	$2,500–4,999
Eliot Society Member	$1,000–2,499

Recognition levels are based on cumulative gifts made in a fiscal year, July 1–June 30.

Your gift to Washington University is tax-deductible to the extent allowed by law.

With You. The WashU Campaign

Your gift to the Annual Fund counts toward With You: The WashU Campaign. Visit **withyou.washu.edu** to learn more.

CA-0609

Questions? Call 877-215-2727 or email annualfund@wustl.edu

8/2026