MBL ANNUAL GIVING PLEDGE FORM

Thank you for your support of the MBL! To make an Annual Fund pledge or recurring gift, please fill out the form below and mail to the address at the bottom of the page.

I/We _____ in consideration of the _____, i transformative work of the MBL in shaping scientific leaders and advancing scientific knowledge, am pleased to make a special Annual Fund commitment to support the MBL. My/Our choice of gift plan is indicated below.

Sincerely,

_____ _____

Name (please print) Signature Date

_____

Address Phone Email

Please choose one of the following gift plans:

‰ Multi-Year Plan

I/we enclose my/our Annual Fund gift of $_____, and pledge $_____ to the MBL Annual Fund each year, to be paid in the month of _____ from 20__ through 20_____, for a total pledge of $_____.

‰ MBL Sustaining Donor Plan (Monthly Giving)

I/we enclose my/our Annual Fund gift of $_____. I also authorize my bank or credit card company to charge my account and pay to the MBL the amount of $_____ on the 15th of each month ($_____ per year) beginning ____/____/____. This authorization will remain in effect until ____/____/____ or until I, the MBL, or my financial institution, revoke it.

Payment Method:

‰ A check made payable to the MBL is enclosed.

‰ Please debit my bank account. A voided check is enclosed.

‰ Please charge my credit card: ___ Visa ___ MasterCard ___ Discover ___ AmEx