



## Gift Donation Form

In consideration of my/our interest in and of the support of the mission of Holy Cross Services, I/we make a gift commitment to Holy Cross Service for the purpose(s) described below:

- Unrestricted**  
 **Restricted** for the following priorities \_\_\_\_\_

\$\_\_\_\_\_ **Total gift Amount**

**I wish to pay by:**

**Credit Card:**  VISA  MasterCard  Discover  AMEX  Check (please make checks payable to Holy Cross Services)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Account number: \_\_\_\_\_ Exp. Date \_\_\_\_\_ Code \_\_\_\_\_

Signature \_\_\_\_\_ Phone \_\_\_\_\_

### **In Memory/In Honor of Gifts**

If you would like to make your gift in honor or memory of someone, please share their information with us:

Name \_\_\_\_\_

In Memory  In Honor

Please notify the person/family below of my gift:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**For information on making a gift commitment over time, for leaving Holy Cross in your estate, or for questions, please contact:**

Kassie Kretzschmar [KKretzschmar@hccsnet.org](mailto:KKretzschmar@hccsnet.org) at Holy Cross Services for any questions

**Please Mail Completed Form to:**

Holy Cross Services, Mission Advancement, 8759 Clinton-Macon Road, Clinton, Michigan 49236