



Menninger®

Thank You for Your Support

The Menninger Clinic Foundation is a 501(c)(3) non-profit organization (EIN 81-0588012).
Gifts are tax deductible to the extent allowed by law.



Please Print

NAME

MAILING ADDRESS

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CITY

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ZIP CODE

SINGLE GIFT

I would like to make a one-time donation of:

☐ \$250 ☐ \$100 ☐ \$50

☐ Other \$ _____

MONTHLY RECURRING GIFT

Please charge my credit card monthly at the amount below until I give further notice. *Charges will occur during the third week of each month.*

☐ \$25/mo. ☐ \$10/mo. ☐ \$5/mo.

Please designate my gift to: ☐ Annual Fund (*unrestricted*) ☐ Training & Education ☐ Research
 ☐ The Gathering Place ☐ Yudofsky Residency ☐ Roy & Walter Menninger Endowment

PAYMENT INFORMATION

☐ My check is enclosed (*payable to The Menninger Clinic Foundation*)

☐ Please charge my credit card: ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover

NAME ON CARD

SIGNATURE

CARD NUMBER

EXPIRATION (MM/YY)

PHONE

My preferred name for printed recognition is:

☐ Please keep my gift anonymous.

☐ My company's matching gift form is enclosed.

☐ Menninger is included in my will.

☐ Please contact me about how to give through my estate and/or make gifts of stock or mutual funds.

TRIBUTE INFORMATION

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

TRIBUTE NAME

☐ Please send notification of my tribute gift to:

NAME OF PERSON TO NOTIFY

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MAILING INSTRUCTIONS

After you complete this form, please mail it to:

The Menninger Clinic Foundation
12301 Main Street
Houston, Texas 77035

You may opt-out of fundraising communications from The Menninger Clinic Foundation at any time by calling us at 713-275-5176 or emailing giving@menninger.edu.