



## Mail-In Donation Form

I/We want to donate to Ripon Education Foundation by giving \$ \_\_\_\_\_

☐ Check enclosed payable to **Ripon Education Foundation, Inc**

☐ Credit Card \_\_\_\_\_ 3-or 4-digit security code \_\_\_\_\_  
card number expiration date (mm/yyyy) \_\_\_\_\_

### Contact Information (Required)

Name(s) \_\_\_\_\_

Business Name (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

City State Zip Code

E-mail address: \_\_\_\_\_ Phone number: \_\_\_\_\_

**Affiliation** - Please choose the affiliation we should use when adding your name to our donor list. This is for our promotional use only. Your contact information and donation amount will not be disclosed.

Use blank lines to fill in year if applicable.

☐ Alumnus \_\_\_\_\_ ☐ Parent(s) \_\_\_\_\_ ☐ Grandparent(s) \_\_\_\_\_  
☐ Faculty/Staff ☐ Friend ☐ Student \_\_\_\_\_

**Gift Purpose** – unrestricted gifts will be added to our Program fund to be used at the discretion of our Board of Directors

☐ Teaching & Learning Programs ☐ Scholarships  
☐ Jennie Long Elementary Tutoring ☐ Other \_\_\_\_\_

☐ In Memory of: \_\_\_\_\_

☐ In Honor of: \_\_\_\_\_

Mail Form and Payment To:  
Ripon Education Foundation, Inc.  
PO Box 395  
Ripon, WI 54971-0395

For questions or clarification, contact REF at [riponeducationfoundation@gmail.com](mailto:riponeducationfoundation@gmail.com).

**Thank you for your support!**

*The Ripon Education Foundation is a non-profit charitable 501 (c)(3) corporation that operates independently of the Ripon Board of Education. The Foundation works in partnership with the Oshkosh Area Community Foundation that will document and receipt your gift.*