



# ST. HILDA'S & ST. HUGH'S

## Scheduled Gifts Authorization Form

I authorize St. Hilda's & St. Hugh's to electronically debit my credit/debit card as follows:

Cardholder Name: \_\_\_\_\_

Card type: \_\_\_\_\_ Account Number: \_\_\_\_\_

Billing Zip Code: \_\_\_\_\_ Security Code: \_\_\_\_\_

- I would like to make a gift of \$\_\_\_\_\_ to the St. Hilda's & St. Hugh's Fund. Please divide my donation into monthly installments beginning \_\_\_\_\_ (date) and ending \_\_\_\_\_ (date).
- I would like to make a recurring monthly gift of \$\_\_\_\_\_ to the St. Hilda's & St. Hugh's Fund beginning \_\_\_\_\_ (date) and ending \_\_\_\_\_ (date).

Please note, all gifts to the 2017-2018 St. Hilda's & St. Hugh's Fund must be paid in full by June 30, 2018.

I understand that this authorization will remain in effect as indicated above.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please submit via email to [mhaberland@sthildas.org](mailto:mhaberland@sthildas.org), by fax to (212) 749-7174 or by mail to:

St. Hilda's & St. Hugh's  
Attn: Michele Haberland  
619 West 114<sup>th</sup> Street  
New York, NY 10025-7995