



Our FAITH, Our JOURNEY, Our TIME

GIFT LETTER OF INTENT

SCECINA MEMORIAL HIGH SCHOOL
5000 NOWLAND AVENUE, INDIANAPOLIS, IN 46201

Dear President Therber,

I/We wish to continue the outstanding legacy of Catholic school education for young women and men at Scecina Memorial High School. I/We hereby pledge to participate as stewards in this exciting campaign through the following gift intention:

First Name(s)	Maiden Name	Last Name	Class Year	Spouse Year
Address		City	State	Zip
Phone (Home)		Phone (Mobile)	Phone (Work)	
Email 1		Email 2		

Please recognize me/us in a listing of campaign donors as follows: _____

☐ I/We prefer to remain anonymous.

Gift of Financial Participation

Please accept my/our pledge amount of \$ _____ to be fulfilled over a period of

☐ 1 year ☐ 2 years ☐ 3 years ☐ Other _____

Pledge payments will be made ☐ Monthly ☐ Quarterly ☐ Semiannually ☐ Annually ☐ Other

Starting with an initial pledge payment of \$ _____ in _____ (month) of _____ (year).

☐ I/We have already made a one-time gift and wish to make another gift in the amount of \$ _____ by _____ (month/year).

☐ I/We have already made a pledge to the campaign and wish to extend our pledge by \$ _____ for _____ year(s).

☐ I/We wish to fulfill this pledge through credit card _____ (number) that has an expiration date of _____.

My/Our employer(s) has an employer matching gift program that may be able to match my/our gift.

Company Name

Matching Ratio (if known)

Naming or Memorial Opportunities

☐ I/We are interested in discussing a named or memorial gift opportunity.

If you are able, please let us know the naming or memorial opportunity that interests you: _____

Planned Giving

☐ I/We are interested in receiving information on how we can impact Scecina's future through a planned gift.

☐ I/We have included Scecina in our estate plan in the form of a ☐ Bequest ☐ Gift Annuity ☐ Charitable Trust

☐ Life Insurance Policy ☐ Retirement Account Proceeds ☐ Other _____

Gift of Prayer or Service

☐ I/We will pray for the "Our Faith, Our Journey, Our Time" Campaign and Scecina Memorial High School.

☐ I/We are interested in volunteering for Scecina. Please contact me/us for a conversation.

Signature

Date

(Please make checks payable to Scecina Memorial High School. Gifts are fully tax deductible as allowed by law.)

Thank you for your generous support!