

SUSTAINING MEMBERSHIP FORM

SUPPORT GEORGE EASTMAN CIRCLE SCHOLARSHIPS

The George Eastman Circle recognizes donors who make unrestricted annual gifts to the University for a five-year period. Using this form, you may direct your gift to scholarship support through any of the methods detailed below, and become a sustaining member of the George Eastman Circle.

MEMBERSHIP LEVELS

FELLOWS \$5,000 - \$9,999

☐ My gifts will be matched by _

BENEFACTORS \$10,000 - \$24,999

PATRONS \$25,000 - \$49,999

FOUNDERS \$50,000+

(Please include your company's matching gift form)

Supporting an unrestricted George Eastman Circle Scholarship requires a minimum gift of \$5,000 each year for five years.

Annual payments are due by June 30 in order for the scholarship to be awarded in the following academic year.

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${\it Gift}$ – I am delighted to support a George Eastma	nn Circle Scholarship with a gift	of \$each year for 5 years.
Name	Degree/Year	E-mail
Address		
Signature		Date
☐ This is a joint gift Spouse/Partner Name		
Spouse/Partner Signature		Date
·	(Signature required if joint gift and for	joint Honor Roll listing)
☐ I/We prefer that this gift remain anonymous	☐ I/We prefer not to be lis	'
	☐ I/We prefer not to be list	ted in online Honor Rolls
Payment Information □ New Member		wal Payment on Existing Membership
	☐ Annually ☐ Expected Mor	nth of Payment(required)
Frequency:	☐ Annually ☐ Expected More checks payable to the University of F	nth of Payment(required) Rochester) □ One-Time □ Recurring (No reminder will be sent)
Frequency:	☐ Annually ☐ Expected More checks payable to the University of F	nth of Payment(required)
Frequency:	☐ Annually ☐ Expected More checks payable to the University of F to my credit card: ☐ AmEx	Rochester) One-Time Recurring (No reminder will be sent) (Protecting your sensitive information is a high priority. To pay by credit card in the most secure way, please visit our website at
Frequency:	☐ Annually ☐ Expected More checks payable to the University of Fto my credit card: ☐ AmExSignature	Rochester) One-Time Recurring (No reminder will be sent) (Protecting your sensitive information is a high priority. To pay by credit card in the most secure way, please visit our website at georgeeastmancircle.com/make-a-gift or call (866) 673-0181)
Frequency:	☐ Annually ☐ Expected More checks payable to the University of F	Inth of Payment
Frequency:	Annually Expected More checks payable to the University of F to my credit card: AmEx Signature	Inth of Payment
Frequency:	Annually Expected Mone checks payable to the University of F to my credit card: AmEx Signature EastmanCircle.com	Rochester) One-Time Recurring (No reminder will be sent) (Protecting your sensitive information is a high priority. To pay by credit card in the most secure way, please visit our website at georgeeastmancircle.com/make-a-gift or call (866) 673-0181) Expiration Date

George Eastman Circle Scholarship Gift Designation

\$	Eastman School of Music	\$	School of Nursing		
\$	Hajim School of Engineering & Applied Sciences	\$	Simon Business School		
\$	School of Arts & Sciences	\$	Warner School of Education and		
\$	School of Medicine & Dentistry		Human Development		
All scholarships will be identified as George Eastman Circle Scholarships. I/We would like our scholarship support t be specifically recognized as follows (for example, "Jane and John Doe George Eastman Circle Scholarship"):					
ional Gif	t Designation				
	ting scholarships, I/we would like to contri se select the area(s) below and indicate the				
\$	Rochester Annual Fund	\$	University of Rochester Medical Center		
\$	School of Arts & Sciences	\$	Evo Inctituto		
\$	River Campus Libraries (Rush Rhees, Carlson, POA)	\$	recurosciciec		
\$	Hajim School of Engineering & Applied Sciences	\$	Eastman Institute for Oral Health		
\$	Undergraduate Scholarships	\$	Golisano Children's Hospital		
\$	Rochester Parents Fund	\$	Highland Hospital		
\$	Friends of Rochester Athletics	\$	School of Medicine & Dentistry		
\$	Gwen M. Greene Career and Internship Center		School of Nursing		
\$	Eastman School of Music	\$	Strong Memorial Hospital		
\$	Eastman Parents Fund	\$	Thompson Health		
\$	Simon Business School	\$	UR Medicine Home Care (Formerly VNS)		
\$	Warner School of Education and Human Development	\$	Wilmot Cancer Institute		
\$	Diversity Program Fund	\$			
\$	Eastman Community Music School	\$	Strategic Opportunities Fund		
\$	Memorial Art Gallery Annual Fund	\$	Other fund:		
\$	Memorial Art Gallery Membership*				
*Memorial Ar starts at \$1,75	Mt. Hope Family Center rt Gallery Director's Circle membership 50/yr.	The list of George Eastman Circle eligible funds has been expanded. If you do not see a fund in this listing that you wish to support, please call (866) 673-0181 for help finding a fund.			
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 OFFICE USE ONLY
 Entity ID _____
 Pledge/Receipt #____
 Batch #____

 Proposal # ____
 Membership Number _____
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