



Loyola High School Donation Form

Name: _____ Year of Graduation: _____

Tel. (H): _____

Address: _____

(C): _____

City/Prov: _____ Postal Code: _____

Email: _____

I WANT MY GIFT TO SUPPORT:

Loyola Bursary Endowment

Name of specific endowment: _____

Bursaries

Greatest Needs

DONATION INFORMATION:

Gift Amount \$ _____

__ One time __ Monthly __ Quarterly

Cheque (*payable to Loyola High School Foundation
or U.S. Friends of Loyola Foundation*)

Visa Mastercard Amex

Card Number _____

Expiry Date _____ CVC: _____

Signature _____

I wish to remain anonymous.

I would like to be contacted about including Loyola in
my Estate plans.