Gift Form

I would like to contribute to these areas of special interest:

$_____ General Support (525201)  $_____ General Operating Endowment (525253)
$_____ Director’s Fund (525416)  $_____ Natural Areas Endowment (525221)
$_____ Herbarium (525405)  $_____ Student Intern Endowment (525425)
$_____ Horticulture (525405)  $_____ Coker Arboretum Endowment (525233)
$_____ Education (525237)  $_____ Allen Education Center (525230)
$_____ Other __________________

Total: $___________________

Name(s)
_____________________________________________________________________________
Address
_____________________________________________________________________________
City  State  ZIP
____________________________________________________________________________________
Email Address (to receive monthly e-newsletter)  Telephone Number

☐ Check payable to the North Carolina Botanical Garden Foundation, Inc.
☐ Credit card payment:  ☐ VISA  ☐ MasterCard  ☐ AmEx
  ☐ Discovery Card

___________________________________  ______________________
Account Number  Expiration Date

Name on Card (please print)

Signature

Billing Information (if different from above):

Name ______________________________________ Telephone or Email____________________

Address ________________________________________________________________

City __________________________ State _____________ ZIP __________

Return to:
North Carolina Botanical Garden
CB #3375; Allen Education Center
UNC-Chapel Hill
Chapel Hill, NC 27599-3375