

Name

Name

Email

Email

Address

CREDIT CARD PAYMENT: To make your gift by MasterCard, VISA or Discover, please go to <u>www.msvma.org</u> and click on "Membership and Benefits," then "Make A Gift" or contact the MSVMA State Office at 231.592.9344 to make your credit card gift by phone.

Yes, I/we wish to help support the mission of MSVMA with a gift made by check.

My/our gift of

$\Box$ \$25		$\Box$ \$100	$\Box$ \$250	□ \$500	$\Box$ \$750	$\square$ \$1,000 Other:
$\Box \psi 2 J$	$\Box \psi J 0$	$\Box \Psi I 0 0$	$\Box \psi 250$	$\Box \psi 500$	$\Box \varphi I J U$	

should be used to support (please check all that apply):

	Clinician/Consultant Pro	ogram		Carolyn	F. Leep	Scholarship
--	--------------------------	-------	--	---------	---------	-------------

□ General Fund □ Membership Relations

Please make your check payable to MSVMA.

Thank you for your willingness to help MSVMA!

□ Please send information about including MSVMA in my estate plan.

 $\Box\,$  I have made a provision for MSVMA in my estate plan.

Print form and mail to MSVMA, P.O. Box 1131, Big Rapids, MI 49307