



Garvan Woodland Gardens
University of Arkansas

Please accept my gift of:

_____ \$1,000 _____ \$500 _____ \$250 _____ \$100
_____ \$50 _____ \$25 _____ \$10 _____ Other \$ _____

Please designate my gift to:

_____ The Gardens' highest priority _____ Evans Children's Adventure Garden
_____ Perry Wildflower Meadow _____ Lights on the Landscape (holiday lights display)
_____ Rose Garden _____ Education
_____ Development _____ Garden Operations
_____ Endowment (Please circle one: Children's Garden, Rose Garden, Landscape Architecture, Educational Building)

I will be making my gift by:

_____ **Check** (payable to Garvan Gardens)
_____ **Credit Card**: (please circle one: VISA MasterCard Discover American Express)
Account Number: _____ Expiration Date: _____
Signature: _____ Date: _____
_____ **Electronic Bank Draft** (Please enclose a voided check for the bank account to be drafted)
_____ Please continue this monthly draft for _____ months for a total gift of \$ _____
_____ Please continue this monthly draft until further notice.
Signature: _____ Date: _____

This gift is being made:

_____ Anonymously _____ Jointly with my spouse: _____
_____ In memory of _____
_____ In honor of _____

Please include the notification name and mailing address: _____

Personal Information:

Name _____
Home Address: _____
E-mail Address: _____
Preferred Phone Number: _____ (Circle: Home Cell Work)
Employer/Former Employer : _____

Many employers will match employee donations

Work Address: _____

Thank you for your gift!

Completed forms may be returned to Garvan Woodland Gardens • P. O. Box 22240 • Hot Springs, AR 71903-2240