

YES! I want to maintain a vibrant Jewish campus community for my child.

Parent(s) Name(s): _____ Parent Phone: _____

Parent(s) Mailing Address: _____ Parent E-mail: _____

Student Name _____ Student Phone: _____

Student Mailing Address: _____ Student E-mail: _____

Enclosed is my check for \$_____, made payable to Hofstra Hillel.

Please charge my contribution of \$_____ to my Visa MasterCard

Card number: _____ Expiration date: _____

Name as it appears on card: _____ Signature: _____

I would like my child to receive the following packages: _____

Does your employer have a matching gift program? Let us know!

All contributions to Hofstra Hillel are tax-deductible to the full extent of the law. Please detach and return in the enclosed envelope or fax the completed form to (516) 463-7439. Gifts can also be made online at hofstrahillel.org.