

MAIL IN GIFT FORM

Please fill in the appropriate sections, print out this form, and mail to:

JPLI Administration Office
P.O Box 5482
Bay Shore , NY 11706

Please enter the following identifying information.

► **Items marked with an asterisk (*) are required because without them we are unable to record your gift accurately**

STEP 1: PERSONAL INFORMATION

Prefix:	Mr. Mrs. Ms. Dr. If Other, Please Specify:				
*First:		Middle: <small>(or Name When Enrolled at JPLI)</small>		*Last:	Suffix:

If you are not a JP Language Institute alumnus/a or parent, please check here:

If you are a JPLI alumnus/a, please indicate the year or department of that affiliation. JPLI alumni/at, please indicate your residential.

If you are a JPLI parent, please indicate your child/children's progress level with JPLI.

School/Class Affiliation(s): <i>e.g., JPLI Chinese Language Program</i>	
*Email address: Please indicate an email address at which we can contact you.	Please check here if you do not wish your email address to be entered in JPLI record.
*Day Phone:	

Address Information

Please enter the address to which you wish your gift acknowledgment sent:

Address 1:						
Address 2:						
Address 3:						
City:		State:		Zip:		Country:
Which address is this?	Home Business					
Check here if this is a new address:						

Donors may make a gift to many different schools and/or departments at JPLI. Please indicate your preferences and the amount of your gift below.

*Indelicate a program to direct your gift:		
<p>Amount: (Please indicate in US\$ only.)</p> <p>Indicate the amount(s) you would like to give to one or more of the purposes for each School/Area, such as alumni fund/ financial aid, etc.</p>	AMOUNT	PURPOSE
	\$ \$ \$ \$ \$	Check here if gift should be applied to a prior commitment: Other: Please Specify:
If this gift is to the language development research , please indicate the language here: _____		

Additional Gift

*Choose a program or other area to which to direct your gift:		
<p>Amount: (Please indicate in US\$ only.)</p> <p>Indicate the amount(s) you would like to give to one or more of the purposes for each program /Area, such as alumni fund/ financial aid, etc.</p>	AMOUNT	PURPOSE
	\$ \$ \$ \$ \$	Check here if gift should be applied to a prior commitment: Other: Please Specify:
<p>Note :</p>		

Indicate if you are paying by check or credit card:	<input type="checkbox"/> Check <input type="checkbox"/> Credit Card
<i>If you are paying by credit card, please enter your information below (we accept VISA, MasterCard, or American Express):</i>	
Total amount to charge:	\$ _____
*Credit Card type: (please check one)	<input type="checkbox"/> American Express <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA
*Credit Card Number:	_____
*Expiration Date:	____ / (MM) (YY)
*Name as it appears on your card:	_____
If there is any additional information we need in order to handle your gift properly, please provide it here:	

Do you work for a company that matches gifts to school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," please enter the name of your company:	_____
You can significantly increase your gift to JPLI by checking with your human resources office and sending the matching gift form to: <p style="text-align: center;">JPLI Administration Office P.O Box 5482, Bay Shore New York 11706</p>	

Thank you for your support of JP Language Institute

Within the next two weeks, once your check or credit card charge has been processed, you will receive by mail an acknowledgement of your contribution that you can save for your tax records