

DELTA CHI OFFLINE DONATION FORM

Please provide detailed information below. • Cash must be converted to money order or cashier's check and listed below for the donor to receive tax acknowledgment. • Please note: we are unable to split a single gift (check) between multiple participants. Thank you for supporting the V Foundation!

PARTICIPANT NAME
CHAPTER NAME
Donor Name(s)
Street Address
City, State, Zip
Email Daytime Phone:
Donor to receive V Foundation emails? (yes, no) Check Amount: \$
On the Participant Fundraising Page:
Public recognition: please list gift amount and my/our name as follows:
□ Public recognition: please hide gift amount, and list my/our name as follows:
☐ Anonymous: both name and donation amount will be hidden; participant will be notified.
Donor Name(s)
Street Address
City, State, Zip
Email Daytime Phone:
Donor to receive V Foundation emails? (yes, no) Check Amount: \$
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☐ Public recognition: please hide gift amount, and list my/our name as follows:
☐ Anonymous : both name and donation amount will be hidden; participant will be notified.

MAIL DONATIONS (PAYABLE TO THE V FOUNDATION) WITH THIS FORM TO:

The V Foundation Attn: Delta Chi Bracket Challenge 14600 Weston Parkway Cary, NC 27513