

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Day Phone \_\_\_\_\_

I/We enclose a gift of:

\$1,000  \$500  \$250  \$100  Other \_\_\_\_\_

*(Please make checks payable to Whitaker Center for Science and the Arts.)*

Please charge my credit card in the amount of \$ \_\_\_\_\_

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Visa  American Express  Master Card

I/We pledge a total gift of \$ \_\_\_\_\_ to be given as follows:

\$ \_\_\_\_\_ Date \_\_\_\_\_ \$ \_\_\_\_\_ Date \_\_\_\_\_

\$ \_\_\_\_\_ Date \_\_\_\_\_ \$ \_\_\_\_\_ Date \_\_\_\_\_

This gift should be applied to:

Whitaker Center's Annual Fund  Where needed most  Endowment support

Other \_\_\_\_\_

I authorize Whitaker Center to include my/our name(s) in public donor recognition.

The listing should appear as follows \_\_\_\_\_

I decline public recognition for my gift and wish to be anonymous.

Please send me no-obligation information on giving through a bequest in a will, charitable trust, gift annuity, or other options.

Signature \_\_\_\_\_ Date \_\_\_\_\_

*(Signature required for credit card transaction or pledge commitment.)*



**Whitaker  
CENTER**  
For Science and the Arts

Whitaker Center for Science and the Arts  
225 Market Street, 2<sup>nd</sup> Floor  
Harrisburg, PA 17101

Molly Shane, CFRE  
Director of Development  
(717) 724-3886  
mshane@whitakercenter.org

The official registration and financial information of Whitaker Center for Science and the Arts may be obtained from the Pennsylvania Department of State by calling toll free, within Pennsylvania, 1-800-732-0999. Registration does not imply endorsement. Your gift is tax deductible to the extent allowed by law.