



GIVING FORM

Join us in our commitment to support education in communities affected by oppression and poverty and to educate our youth at home on how they can help bring about change in the lives of their peers around the globe. When you participate, your donation will be transferred conveniently from your checking account or credit card directly to The Kikulu Foundation.

Name(s) _____

Address _____

City _____ State _____ Zip Code _____

Telephone _____ Email _____

___ Register here to receive Kikulu Newsletters, information on special events, volunteer opportunities, and more!

I'd like to make a ___ Donation ___ Memorial Gift ___ Honor Gift ___ Anonymous Donation

In Memory/Honor of: _____

As a ___ Monthly Gift ___ Quarterly Gift ___ One-Time Gift

Process my Gift on the: ___ 1st ___ 5th ___ 15th ___ 20th OR ___ 25th of the month

Start Date: ___/___/___ (mm/dd/yyyy)

In the amount of: ___ \$5.00 ___ \$10.00 ___ \$20.00 ___ \$25.00 ___ \$50.00 ___ \$100.00
___ \$250.00 ___ \$500.00 \$ _____ Other Amount

___ **Yes! I wish 100% of my donation amount to go to Kikulu Foundation. I would like to pay the processing fee costs (3% for Credit Card gifts or 1% for ACH gifts) associated with my donation.**

<p><i>For Office Use only:</i> \$ _____ Processing Fee Amount (3% for Credit Card gifts or 1% for ACH gifts) \$ _____ Total Gift Amount (Amount specified above + Processing Fee Amount)</p>

Please apply my gift to:

___ Where it's needed most ___ Any Kikulu program ___ Education scholarships ___ Teacher support

Please transfer my donation from my:

___ Checking Account [Please attach a voided check]

- OR -

___ Credit Card Account    CC Number _____ Expiration Date ___/___

I understand my future donations will be transferred directly from my account as stipulated above. I understand that I may increase, decrease, or suspend my gift any time through the online donation form at www.kikulu.org or by contacting The Kikulu Foundation by phone or mail. All donations provided to The Kikulu Foundation originating as ACH transactions comply with U.S. Law.

Signature (Required) _____ Date _____

Please make a copy of this form for your records or you can request a copy from The Kikulu Foundation.