123-EN—(321)

THE ROTARY FOUNDATION CONTRIBUTION FORM

Contributions can also be made at rotary.org/donate.

1. DONOR OF CONTRIBUTION

Type of Donor (Check one): ☐ Individual ☐ Rotary club ☐ Rotaract club ☐ District ☐ Business
☐ Charitable organization/Foundation ☐ Other _____

Name _____ Donor ID _____

Club Name _____ Club No. _____ District No. _____

Billing Address _____ City _____ State/Province _____

Country _____ Postal Code _____

Daytime Phone _____ Email Address _____

2. DESIGNATION/PURPOSE (Check one):

☐ Annual Fund — SHARE ☐ World Fund ☐ PolioPlus ☐ Disaster Response
☐ Water, Sanitation, and Hygiene ☐ Maternal and Child Health ☐ Basic Education and Literacy ☐ Community Economic Development
☐ Environment ☐ Endowment - _____ ☐ Global Grant # _____ ☐ Other _____

3. CONTRIBUTION DETAILS

Amount of contribution _____ **Currency** _____

Type of Payment (Check one): **For security purposes, please do not send credit card contributions via email.**

☐ **Credit card:** ☐ Visa ☐ MasterCard ☐ Diners Club ☐ JCB ☐ American Express

Make this a recurring contribution: ☐ Monthly ☐ Quarterly ☐ Annually (Select month) _____

Card Number

Expiration Date _____ CVN* _____

Name as it appears on credit card _____ Signature _____

☐ **Check** — Payable to "The Rotary Foundation." Check number _____

☐ **Wire transfer** Date initiated _____ (Please send completed contribution form as soon as possible after initiating a wire transfer.)

*The card verification number, or CVN, is a three-digit number that appears on the back of your credit or debit card; for AmEx, it is a four-digit number on the front of the card. It typically appears following the digits of your credit card number.

4. SHIPPING INFORMATION — Recognition materials only

If recognition materials from this contribution are requested for individual(s) other than donor, please complete the Paul Harris Fellow Recognition Transfer Request Form.

Date of Ceremony _____ ☐ Please do **not** send recognition ☐ Please keep my gift anonymous

Send recognition to (Check one). **Please enter full address with telephone number:**

☐ Donor ☐ Other, enter information below

Name _____ Address _____

City, State/Prov. _____ Country, Postal Code _____

Daytime Phone _____ Email Address _____

5. INDIVIDUAL COMPLETING THIS FORM (if other than donor)

Name _____ Daytime Phone _____

Email Address _____ Date _____

Data privacy is important to Rotary International and The Rotary Foundation (collectively, "Rotary") and the personal data shared with Rotary will only be used for official Rotary business to support Rotary's core business purposes. Personal data collected on this form is subject to Rotary's Privacy Policy found at my.rotary.org/en/privacy-policy.

For contribution or recognition questions, please contact your Rotary International office.
Please send your completed contribution form only once to the appropriate address:

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