



## Wolf River Lutheran High School

220 Zachow St.  
PO Box 77  
Cecil, WI 54111-0007

Phone: (715) 745-2400  
Fax: (715) 745-2496

### ***My Gift to Support WRLHS***

Name

Street Address

City, State, Zip

Phone Number

Email Address

#### **Donation Information:**

Amount of Gift \$

Date of Gift

#### **Type of Gift:**

- Gift  
 Pledge  
 Pledge Payment

#### **Electronic Giving**

- Please send me more information on monthly giving through the Electronic Funds Transfer (EFT) Contribution Plan.

#### **Purpose of Gift:**

- Where Needed Most  
 Tuition Assistance  
 Teacher Wish List

Specify Item from Wish List

- Building Improvements

#### **Designation (optional):**

In Memory of

In Honor of

*Please mail this form to the address listed above, along with your check made payable to **"Wolf River Lutheran High School"**.*

*Your gift is tax deductible, and you will receive a receipt for tax purposes.  
Thanks for your support of Wolf River Lutheran High School!*