



This
LIVING GIFT
may be used to commemorate
any special occasion
OR
to memorialize a loved one
at the end of their earthly life.



WISCONSIN LUTHERAN
HIGH SCHOOL

With this form is my gift of \$ _____, given to Wisconsin Lutheran High School
as a contribution. I want my gift to support the area of greatest need.

I want my gift to support _____

In Honor of _____
INCLUDE FIRST AND LAST NAME

Memorial Other/please specify _____

My Name _____

ADDRESS CITY STATE ZIP

MY PHONE NUMBER MY EMAIL ADDRESS

Send Acknowledgment to _____
NAME

ADDRESS CITY STATE ZIP

**Send form and check to: Wisconsin Lutheran High School
Mission Advancement Office
330 N. Glenview Ave.
Milwaukee, WI 53213-3379**