

Please mail this form to:

Cal Poly Fund
Cal Poly State University
1 Grand Avenue
San Luis Obispo, CA 93407

Yes! I'll Support Excellence at Cal Poly.

Home Address:

Name _____
Address _____
Address _____
City, St, Zip _____
Phone _____
Email _____

Professional Information:

Employer _____
Title _____
Address _____
Address _____
City, St, Zip _____
Phone _____
Email _____

Relationship to Cal Poly:

___ Alumnus/a ___ Parent
___ Friend ___ Faculty or Staff
___ Student ___ Other

If Alumnus/a, Class of _____ (last year attended)
If Parent, name of student _____

Please designate my gift of \$_____ for the:

___ Cal Poly Fund
___ Parent Fund
___ College/Department/ Program/ Area
(specify)

___ Enclosed is my check made payable to:
The Cal Poly Foundation

___ I prefer to charge my
___ AMEX ___ DISC ___ MC ___ VISA

\$ _____
Card # _____
expires _____
Name on Card _____
Signature _____

___ My employer matches gifts. Please contact
the personnel office at your company for
instructions on matching your contribution.

CAL POLY
SAN LUIS OBISPO