



2023 HOLIDAY CARD ORDER FORM

Questions? Please call (608) 262-5534 for assistance.

Your Name _____

Your Address _____

City, State, Zip _____

Telephone _____

E-mail _____

ORDER INFORMATION:

Option 1:

☐ I wish to send _____ Holiday Cards (\$10/card) \$ _____
The full amount of your gift is tax deductible as a charitable contribution.

Sign my cards: _____

(Example: Uncle Joe and Aunt Mary)

Option 2:

☐ I wish to purchase _____ Card Sets (\$35/Set of 10) \$ _____
\$30 of each \$35 card set purchase is tax deductible as a charitable contribution.

Specify card design name: _____

☐ I wish to make an additional gift of:

☐ \$50 ☐ \$100 ☐ \$250 ☐ \$500 ☐ Other \$ _____

TOTAL (Holiday Cards AND Additional Gift) \$ _____

PAYMENT INFORMATION:

Holiday Card payment and additional gift may be combined.

☐ My check made payable to **UW Foundation** is enclosed.

☐ Charge my credit card.

Card Number _____ CVV _____ Exp. Date _____

Cardholder Name (please print) _____

Cardholder Signature _____

MAIL ORDER FORM TO:

Holiday Card Order • UW School of Veterinary Medicine
2015 Linden Drive • Madison WI 53706-1102

***TO QUALIFY AS A 2023 GIFT, credit card gifts submitted via this form must be received by Dec. 20. Gifts made by check must be postmarked by Dec. 31. Online gifts must be completed before 10 p.m. on Dec. 31. Visit supportuw.org/giveto/vetmedholiday to make a gift online.**

VET_2023_Holiday Card 112841700

Option 1: Please send a UW School of Veterinary Medicine Holiday Card to the following people:

Print clearly to avoid errors and undeliverable returns. If more space is needed, please attach additional sheets.

1. Name _____

Address _____

City, State, Zip _____

Specify Card Design Name _____

5. Name _____

Address _____

City, State, Zip _____

Specify Card Design Name _____

2. Name _____

Address _____

City, State, Zip _____

Specify Card Design Name _____

6. Name _____

Address _____

City, State, Zip _____

Specify Card Design Name _____

3. Name _____

Address _____

City, State, Zip _____

Specify Card Design Name _____

7. Name _____

Address _____

City, State, Zip _____

Specify Card Design Name _____

4. Name _____

Address _____

City, State, Zip _____

Specify Card Design Name _____

8. Name _____

Address _____

City, State, Zip _____

Specify Card Design Name _____