

Swiss Benevolent Society of New York

SUPPORT OUR PROGRAMS ONLINE

Scholarships

For Swiss American students domiciled in the states of NY, NJ, CT, PA, DE for college and graduate level education in the US, as well as for US citizens to study in Switzerland.

www.sbsny.org/scholarships

Complimentary Social Services

For all members of the Swiss Benevolent Society in the New York tri-state area needing assistance.

www.sbsny.org/services

Events & Activities

We offer a variety of daytime gatherings and activities in New York, New Jersey, Westchester and Long Island. Come meet fellow Swiss and make new friends.

www.sbsny.org/events/calendar

The Swiss Benevolent Society of New York is a 501(c)(3) public nonprofit organization. All donations, be that monetary or in-kind, are fully tax deductible.

We receive no government support, either Swiss or American. All of our funding comes from the generosity of the Swiss-American community.

For more information or to donate over the phone:

Swiss Benevolent Society of New York

500 Fifth Avenue, Suite 1800

New York, NY 10111

Phone: 212.246.0655

info@sbsny.org

www.sbsny.org

Tax ID: 13-1624199

OUR HEARTFELT THANKS FOR YOUR SUPPORT!

MEMBER DONATION FORM

Please return the completed form to us along with your donation (cash, check or credit card accepted).
You may also donate online at www.sbsny.org

The Swiss Benevolent Society of New York is a 501(c)(3) not-for-profit corporation. All donations are tax-deductible to the extent allowed by law. Our Tax ID: 13-1624199.

Basic Membership

- \$ 60 Individual (1 person) Membership
- \$ 100 Couple (2 persons) Membership
- \$ 120 Family Membership

Donors are listed in the Annual Report in the following categories:

Member Contributions Levels (incl. Basic Membership)

- \$ 60 Bronze level
- \$ 101- 200 Silver level
- \$ 201- 350 Gold level
- \$ 351 -650 Platinum level
- \$ 651-1499 Diamond level
- \$ 1,500 and up Life Membership

Other Contributions:

- \$ 60 and up Benefactors, in addition to Life Membership
- \$ 1,000 and up Patron, in addition to Life Membership

Donation Amount: \$ _____ for Year: 2016 2017

Donation for: Social Services Scholarships Both

First Name: _____ Last Name: _____

Address: _____ City, State, ZIP: _____

E-mail: _____ Telephone: _____

Donation by: Check (please enclose) Visa MasterCard American Express

Name on Card: _____

Card Number: _____

Expiration Date: _____ CVV Code: _____

Billing Address: _____

(If different from above)

Recognition Information This donation is made in memory of (Name): _____

This donation is made in gratitude of (Name): _____

Matching gift program If your company has a matching gift program, please inform your employer of your donation.

Send me more information about:

- Social Services
- Scholarships
- Daytime Outings & Events
- Don't mention me in the annual report

THANK YOU FOR YOUR DONATION!