

Medical Student Humanism Fund (MSHF)

I, _____, am pleased to donate \$ _____ to the Medical Student Humanism Fund (MSHF) at the American University of Beirut. This contribution will be restricted to needy patients at AUBMC. Contributions can be made by cash, check or credit card. Please print and fill this form, and include it with your payment, and send to:

Mr. Walid Katergi
Office of Development
College Hall, 3rd Floor
P O Box 11-0236
Beirut, Lebanon

OR

Please drop your envelope with payment in the safe located near the cashier's office (hospital ground floor).

For **CASH** contributions, please include your payment and the filled form.

For **CHECK** contributions, please make checks payable to AUB-MSHF.

For **CREDIT CARD** contributions, please bill my:

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Credit Card Number: _____

Name (as it appears on Credit Card): _____

Signature: _____ Expiry Date (MM/YY): ____ / ____

DONOR INFORMATION

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Your name as listed in our records will be published in the AUB Contributors Report. If you want your name to be spelled differently, please specify below:

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