



# American College Health Foundation

*Building a foundation for the future of college health.*

1362 Mellon Road, Suite 180, Hanover, MD 21076 ♦ (410) 914-5575 ♦ mproudf@acha.org

## Contribution Form

I would like to help build a foundation for the future of college health by making a contribution in the amount of:

- \$ 10,000 Ruby Level Donor
- \$ 5,000 Platinum Level Donor
- \$ 2,500 Gold Level Donor
- \$ 1,000 Silver Level Donor
- \$ 500 Distinguished Donor
- Other \$ \_\_\_\_\_

To the following fund(s):

- Aetna Student Health Fund** – an unrestricted fund that supports any project or activity benefiting ACHA members and the college health field
- Ayers/Battle/Thomas Diversity Fund** – support efforts to encourage and promote diversity within ACHA and institutions of higher education by addressing ethnic health related issues
- Clifford B. Reifler Fund** – provides support to enhance the Journal of American College Health
- Foundation Endowment Fund** – an unrestricted fund that supports specific projects and activities benefiting ACHA members and the field of college health
- Gallagher Koster Innovative Practices in College Health Fund** – provides grants to help fund the development of creative solutions to allow students better access to quality healthcare
- Health Promotion in Higher Education Fund** – provides support to promote and enhance health promotion and prevention services in higher education
- Josh Kaplan Fund for Clinical Medicine** – supports professional development activities and projects that focus on the practice of clinical medicine
- Murray DeArmond Student Activity Fund** – supports educational activities and events benefiting groups of students at annual meetings
- Professional Nursing Fund** – supports, enhances, develops and/or creates nursing activities within ACHA
- Stephan D. Weiss, PhD Mental Health Fund for Higher Education** – supports efforts to promote and improve the quality of mental health care to students
- UnitedHealthcare StudentResources Fund** – an unrestricted fund that supports annual meeting programming and professional development activities, benefiting ACHA members

Your contribution can be made in memory of, or in honor of a colleague or loved one. Please list the name and contact information below so we can send notification of your gift:

Please check one: In memory of ( ) In honor of ( ) Foundation Star\* ( )

Name \_\_\_\_\_

Address \_\_\_\_\_

*\*Foundation Star: in honor of a retiree's years of dedicated service to the field of college health*

**Please complete the following information:**

Contributed by: \_\_\_\_\_

Institution: \_\_\_\_\_

Preferred Address: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

(Note: If contributed by an organization or group, please provide a contact name.)

**Choose a Payment Method:**

Check (enclosed)

Pledge Payments — Please indicate the number of payments and amount:

# \_\_\_\_\_ payments of \_\_\_\_\_ each. Enclose first payment or, if pledging by credit card, indicate the month to begin automatic payments \_\_\_\_\_

Credit Card:  Visa  Master Card  American Express

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Cardholder's Name \_\_\_\_\_ Card Security Code \_\_\_\_\_

Signature \_\_\_\_\_

**Please return this form with your contribution to:**

**American College Health Foundation  
1362 Mellon Road, Suite 180, Hanover, MD 21076**

**(Please make checks payable to ACHF )**

**To contact ACHF:  
(410) 914-5575  
E-mail: [mproudfoot@acha.org](mailto:mproudfoot@acha.org)**