

Please fill out this form and mail in with donation.

First Name

Last Name

Email address

Street address

City

State

Zip

Donation amount

If applicable,

my gift is in honor of:

my gift is in memory of:

Would you like us to send a note to the individual or family member of the individual you are acknowledging?

Yes  No  NA

Email

Street address

City

State

Zip

Make check payable to Stanford University (on the memo line write LSLW) and mail to:

LSLW/HIP

3300 Hillview Avenue, Suite B

Palo Alto, CA 94304

Please note: We do not share contact information with other organizations.

