Tri Psi Scholarship Fund Donation Form

Enclosed is my contribution of: _____

Donor Name: _____

Donor Address: _____

City: _____State/Prov: _____

Zip/Postal Code: _____Phone: _____

In memory of: _____

In recognition of: _____

Birth, Anniversary, Graduation, Death

Send Announcement Card to: _____

Address:

_____

City: _____State/Prov: _____

Zip/Postal Code: _____ Phone: _____

Make check payable to: Tri Delta Foundation

Write Tri Psi Scholarship Fund on memo line

Mail check and form to:

Tri Delta Foundation
14951 N. Dallas Pkwy. Suite 500
Dallas, Texas 75254