Name a seat in the William D. Purser, DC Center ($500)

- Print clearly using ALL CAPS
- If it applies, please initial your choice, In Honor Of or In Memory Of
- If you prefer different wording, please use the second line and print the names clearly using ALL CAPS
- Leave a space between words
- Keep a copy of this form for your records

In Honor Of ___________________________                             OR                              In Memory Of ___________________

OR

___________________________________               ____________________________________

Signature        Date

___________________________________                ___________________________________

Daytime Contact Number     Evening Contact Number

Please send original form via email to the address listed below OR fax it to 636-207-2402.
Payment may be made outright or in two installments via check or credit card.

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