



Pledge/Donation Form

About the Fund

The Forward Fund was established to create opportunities that advance the science, development and application of cancer immunotherapy, as well as help expand the knowledge of and interest in cancer immunotherapy as a fourth standard of care. The Fund endeavors to financially support early career scientists' research initiatives through fellowship grants and educational programs for stakeholders within and peripheral to the cancer immunotherapy field. The Fund also aims to support the development of policies on best practices in clinical trials, assessment of relevant immunologic biomarkers, and clinical management. Your contribution helps to ensure the future of cancer immunotherapy research, translation, and clinical application.

C	n	n	•	-	n			n
	u		L		ш	Į u	ı.	

AS a	a 501(c)(3) organization, donations made to STIC are tax-deductible as charitable	e contributions to the extent allowed by law.		
	General Charitable Contribution*	Amount: \$		
	Estate Gift* (A member of the SITC staff will contact you with more details.)	Amount: \$		
	Honoraria Transfer (A member of the SITC staff will contact you with more details and transfer inst	Amount: \$		
Named Fund Contribution* Fund(s):		Amount: \$		
	"Friend of the Society" Fund / Ribbon Purchase (\$50 minimum contribution. Applied at the next SITC Annual Meeting)	Amount: \$		
Ρl	edge			
* It	rems marked with * are eligible for a pledged contribution.			
	Please invoice me later. I will donate the above amount over (check or	ne):		
	□ 1 year □ 3 years □ 5 years □ 10 years			

Curo T-Shirt

A portion of this purchase is tax deductible as a charitable contribution.



Indicate Size(s) and Quantity

Size	Quantity	Subtotal (\$25/each)
Total:		\$

Size: Unisex sizes Medium, Large, and X-Large. 100% cotton

Price: \$25/each; includes shipping to U.S. states and territories. Contact the SITC office for more

information on student pricing, international shipping, and bulk orders.





Pledge/Donation Form (continued)

Contact Information □ Please check here if you do NOT wish to be listed in donor acknowledgments. Name (as you would like it listed): Company/Institution: Address: Country: Email: Phone: Fax: **Payments** Total Amount (combined totals from Page 1): \$ Check: □ Enclosed Check # Payable to "Society for Immunotherapy of Cancer" (U.S. funds drawn from a U.S. bank) **Credit Card:** □ VISA □ American Express MasterCard Card Number: Expiration Date: Cardholder Name (please print):

Please submit this form and payments to:

Society for Immunotherapy of Cancer Attn: SITC Forward Fund

Signature: Date:

555 E. Wells Street, Suite 1100, Milwaukee, WI 53202-3823 Phone: (414) 271-2456 ~ Fax: (414) 276-3349 ~ Email: info@sitcancer.org