



8/0)RXQGDWLRQ
\$GGUHVV 8QLYHUVLW\ \$YHQXH ‡ 0RQURH /\$
3KRQH)P[‡:HE XOP HGX JLYH

Personal Information

NAME(S) _____ E-MAIL _____

(_____) _____ - _____ (_____) _____ - _____ (_____) _____ - _____
HOME PHONE (INCLUDE AREA CODE) CELL PHONE (INCLUDE AREA C ODE) BUSINESS PHONE (INCLUDE AREA CODE)

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

Please Designate My Gift To:

8QLYHUVLW\ 3ULRULW\ 1HHGV 8/0 6FKRODUVKLS)XQG
&ROOHJH RI \$UWV (GXFDWLRQ DQG 6FLHQFHV8/0 5HVHDFK ([FHOOHQFH)XQ
&ROOHJH RI %XVLQHVV DQG 6RFLDO 6FLHQFHVLWW\ 'H*UHH 6FKRRO RI 1XUVL
&ROOHJH RI +HDOWK 6FLHQFHV 0\ 3DWLRQ
&ROOHJH RI 3KDUPDF\ @@@@
)RU D FRPSOHWH OLVW RI IXQQGZZYLVWQWKHLZHIEVLWH

Pledge Amount
Total Pledge Amount: \$ _____
Balance to be Paid : Monthly Quarterly Semiannually Annually
Installments of \$ _____ For a period of year(s): _____ Date Beginning: _____
*Pledge reminder will be sent.

Payment Information
Amount Enclosed: \$ _____
&KHFNV 3D\DEOH WR 8/0)RXQGDWLRQ
&KDUJH 0\ &DUG
SIGNATURE _____ DATE ____/____/____
PRINTED NAME OF CREDIT CARD HOLDER (PLEASE PRINT CLEARLY) _____ Discover VISA MasterCard American Express
CREDIT CARD ACCOUNT NO. _____ EXP. DATE ____/____ SECURITY CODE _____