

Pre-Authorized Credit Card Pledge Agreement Form



GIFT AND DONOR INFORMATION

Yes! I'd like to support the University of Saskatchewan through my:

Monthly Quarterly Yearly

Donation to: _____
(write area(s) you wish to support here)

Please charge to my credit card on the 1st **OR** the 15th of the month for:

\$25 \$50 \$100 Other (please specify amount) _____

Start Date: ____ / ____ / ____ End Date: ____ / ____ / ____
Day / month / year Day / month / year

I wish to make my pledge indefinitely (until cancelled in writing).

This donation is being made on behalf of: An individual A business

First name: _____ Last name: _____

Middle name: _____ Business name: _____

Mailing address: _____

City: _____ Province: _____ Postal code: _____

Home phone: _____ Business phone: _____

Email address: _____

This is a joint gift with my spouse _____
(first name, middle name, last name)

If you choose not to be publicly recognized for your gift, we will honour your wishes. Please check any or all of the following:

Do not publish my name with regard to this gift.

Do not publish my name with regard to all gifts.

Yes! I am interested in learning more about other ways I can support my university, including gifts of stock, life insurance, and bequests.

The University of Saskatchewan honours donors through invitations to special events, listings in online and print publications, and updates on the impact of your giving. We look forward to sharing our success with you!

