

## DONOR PLEDGE FORM

Mr.  Mrs.  Ms.

Name \_\_\_\_\_

Position \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Telephone (\_\_\_\_\_) \_\_\_\_\_

Business Telephone (\_\_\_\_\_) \_\_\_\_\_

Fax (\_\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

Total Gift or Pledge Amount: \$ \_\_\_\_\_ over \_\_\_\_\_ years.

monthly payment

annual payment

other, specify \_\_\_\_\_

### Method of payment (check one)

Cheque(s)

Visa/MC/AMEX# \_\_\_\_\_ Exp. \_\_\_\_\_

Cheques made payable to Georgian College.

Payroll deduction for Georgian College (see internal gift pledge form)

### Donor recognition information

Please state how you would like your name(s) to appear:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorizing Signature

### Gift information

Please state where you would like to designate your gift:

\_\_\_\_\_

### Annual gift

Reminders will be sent annually in November for five years, unless otherwise specified. Receipts will be issued for income tax purposes.

### Thank you for your support

Georgian College respects the privacy of our donors. Information collected will be used to keep you informed about activities and opportunities to support Georgian College

I do not wish to allow my name to be used for these purposes

I wish to remain anonymous

Georgian ●●● Connects

Power of Education Campaign

.....are you connected