



Memorial

University of Newfoundland

FACULTY & STAFF CAMPAIGN

Name: _____ Faculty/School/Dept: _____	
E-mail: _____ Phone: (____) _____	
Employee Number: _____ I am (check one): <input type="checkbox"/> Faculty <input type="checkbox"/> Staff	
<p>I want to support Memorial with:</p> <p><input type="checkbox"/> A payroll deduction gift of \$ _____ per pay period beginning on _____ (yy/mm/dd) and:</p> <p style="margin-left: 40px;"><input type="checkbox"/> Continue until I notify you otherwise</p> <p style="margin-left: 40px;"><input type="checkbox"/> To be paid over _____ years, or</p> <p style="margin-left: 40px;"><input type="checkbox"/> I already donate; please increase my gift to the amount shown.</p> <p><input type="checkbox"/> A recurring gift of \$ _____ per <input type="checkbox"/> month <input type="checkbox"/> year charged to my credit card (see below)</p> <p><input type="checkbox"/> A one-time gift of \$ _____ charged to my credit card.</p> <p><input type="checkbox"/> A one-time gift of \$ _____ in the form of a cheque <i>(Please make cheque payable to Memorial University of Newfoundland and place the designation of your gift on the 'MEMO' line)</i></p>	
<p>I would like my gift to support:</p> <p><input type="checkbox"/> Faculty/Department: _____</p> <p><input type="checkbox"/> Area of Greatest Need</p> <p><input type="checkbox"/> Memorial Scholarship Endowment Fund</p> <p><input type="checkbox"/> Other (e.g. existing scholarship fund; In Memoriam, etc.) _____</p>	<p>Credit Card Information</p> <p>Card Type: <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard</p> <p>Card Number: _____</p> <p>Card Expiry (MM/YY): ____/____</p> <p><i>Payroll deduction gifts will be shown on your T4 slip as a charitable donation. If making a gift through cheque or credit card, a tax receipt will be mailed to you. Recurring monthly gifts through credit-card are receipted annually at the end of the fiscal year.</i></p>
<p>_____ Signature of Donor</p> <p>_____ Date</p>	

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PLEASE RETURN FORM TO ALUMNI AFFAIRS IN THE ENVELOPE PROVIDED.