

- ☐ Yes, I am pleased to support the employee giving program at Cape Breton University.

(Please note that all donations are tax-deductible.)

Name: \_\_\_\_\_ Employee #: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

CBU Dept: \_\_\_\_\_ CBU Extension: \_\_\_\_\_ Date: \_\_\_\_\_

- ☐ Yes, I am CBU Alumni (including St. FX Junior College, NSEIT, CCB and UCCB)

### GIFT INFORMATION

- ☐ **PAYROLL DEDUCTION**

I would like to support the employee giving program by authorizing a pledge of the below amount per pay period.

☐ \$10    ☐ \$20    ☐ \$30    ☐ \$50    ☐ Other \$ \_\_\_\_\_

- ☐ **MONTHLY GIFT** I would like to make a monthly gift of \$ \_\_\_\_\_

☐ Visa    ☐ Mastercard    Credit Card # \_\_\_\_\_ CVV: \_\_\_\_\_

Expiry Date (month/year): \_\_\_\_\_ Signature: \_\_\_\_\_

- ☐ **ONE-TIME GIFT** I would like to make a one-time gift of \$ \_\_\_\_\_ ☐ Cheque Enclosed

☐ Visa    ☐ Mastercard    Credit Card # \_\_\_\_\_ CVV: \_\_\_\_\_

Expiry Date (month/year): \_\_\_\_\_ Signature: \_\_\_\_\_

- ☐ **DESIGNATION**

Please designate my gift to: ☐ Perseverance Fund (scholarships & bursaries) ☐ Other \_\_\_\_\_

*Would you like to create your own award? Contact us to find out how.*

### GIFT ACKNOWLEDGEMENT

On occasion, CBU publicly acknowledges donors of the university. Please check the appropriate box below:

- ☐ Yes, Cape Breton University has permission to publish my name in any donor listing.

Please publish my name as: \_\_\_\_\_

- ☐ No, please do not publish my name in any donor listing.

Please note: If the gift acknowledgement section is not completed, it is assumed that permission is granted to CBU to publicly acknowledge your gift in any donor listing using the name that appears on this pledge sheet.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- ☐ Please check this box as your electronic signature.

Donations will continue unless cancelled with a signed notification to the development office c/o Joey Lever.