

Donation Form

Donor Information:

Name(s)	
Address	
City	
Province, Postal Code	
Telephone	
Email	

Gift Information:

I (we) pledge a total of \$ _____ .

-OR- I (we) pledge a total of \$ _____ to be paid: ___ Monthly ___ Quarterly ___ Annually

I (we) will make payments over: ___ 1 year ___ 2 years ___ 3 years ___ 5 years

My (our) gift is designated to: _____

Acknowledgement Information:

Please use the following name(s) in all acknowledgements. (Please print.):

_____ I (We) wish to remain anonymous.

Payment Options:

- **By Cheque:** Please make cheques payable to “Athabasca University” and remit to: Advancement Office, Athabasca University, 1 University Drive, Athabasca, AB T9S 3A3 Attention: Blanche Emes

- **By Credit Card:** ___ Visa ___ M/C ___ American Express

Card Number: _____ Expiry Date: _____

Cardholder signature: _____

- **Gifts of Securities:** Please contact Julia Sutherland at jsutherland@athabascau.ca or at 403-294-7322

Signature(s) _____ **Date** _____

You will receive a charitable donation tax receipt for any gift over \$10.

THANK YOU!

Charitable Registration # 10673583ORR0001