



**YES! I WISH TO SUPPORT THE UNIVERSITY OF SASKATCHEWAN**

**I'D LIKE TO MAKE A GIFT OF:**

- \$50    \$100    \$250    \$500    \$1,000    \$5,000
- Other \$ \_\_\_\_\_

**THIS WILL BE A:**

- One-time gift
- Monthly gift of: \$ \_\_\_\_\_ for \_\_\_\_\_ months.
- Annual gift of: \$ \_\_\_\_\_ for \_\_\_\_\_ years.

**I'D LIKE MY GIFT TO SUPPORT** *(Please specify if there is a particular fund or scholarship that you would like to contribute to):*

College: \_\_\_\_\_ Fund: \_\_\_\_\_

**OR**

- The Centennial Fund *(general Scholarships and Bursaries)*
- The President's Student Experience Fund *(extracurricular learning opportunities for students)*
- Other *(please specify):* \_\_\_\_\_

**CONTACT INFORMATION:**

Full Name: \_\_\_\_\_ Spouse Full Name *(if Joint)*: \_\_\_\_\_  
*(Please include middle initial for tax receipt purposes)*

Full Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_ Employer *(\*optional)* \_\_\_\_\_

*\*Some employers will match their employee gifts to Charitable Organizations, we can let you know if your employer is one of them!*

Receipt Preference for *this* gift:  Paper or  Electronic *(please include email address to send receipt to)*

Are you interested in learning more about leaving a gift through your Will or estate plan to support students or research at the University of Saskatchewan?    Yes    Not at this time.

**ANONYMITY: Please indicate the wishes regarding published recognition of the donation:**

- I give permission for name to be published *(In recognition of gift, the U of S is proud to honour donors through invitations to special events, listings in online and print publications, and updates on the impact of the gift to the university.)*

Your preferred published name: \_\_\_\_\_

**IF NO:** I prefer to remain anonymous with regards to:    this gift   **OR**    all gifts

**PAYMENT OPTIONS:**

**Payment Amount \$** \_\_\_\_\_   **Payment Type:**    Cash    Cheque/Money Order    Pre-Authorized Debit\*\*  
Credit Card *(please specify):*    Visa    MasterCard    AMEX

Name as shown on card: \_\_\_\_\_ Middle initial of cardholder (tax receipt purposes): \_\_\_\_\_

Cardholder Signature: **x** \_\_\_\_\_ Date: \_\_\_\_\_

Corporate Card?    Yes    No   If Yes, name/address of company: \_\_\_\_\_



Expiry: \_\_\_\_ / \_\_\_\_  
MM/YY

Canada Revenue Agency  
Charitable Registration Number:  
11927 9313 RR0001

Thank you for choosing to support the University of Saskatchewan.

### COMPLETION OF DONATION FORM

Please print and complete the Donation Form. This form is in an electronic fillable format for those that prefer to complete the form online. However, please print the form and mail or fax to the following address:

**University Relations**  
**G16 Thorvaldson Building, 110 Science Place**  
**Saskatoon, SK S7N 5C9**  
**Fax: 306-966-5571**

(Please **do not** email us your credit card information)

### PAYMENT OPTIONS

#### CREDIT CARD:

If your preference is to submit securely online and pay by credit card, please go to: [www.usask.ca/givenow](http://www.usask.ca/givenow)

or

Call 1-800-699-1907 (*toll free outside of Saskatoon*).

If your preference is to mail your donation form, please print your credit card number, and expiry date in the spaces provided. Please make sure to sign and date the form in the signature area, as well.

#### CHEQUE/MONEY ORDER:

Please make cheque payable to the University of Saskatchewan.

Post-dated cheques – for monthly gifts only, please.

#### \*\*PRE-AUTHORIZED DEBIT OPTION:

If you wish to donate through automatic withdrawals from your bank account, please complete and return a Pre-Authorized Debit (PAD) Agreement found on our website at [www.usask.ca/pad](http://www.usask.ca/pad) or contact our office at 1-800-1907 to have the agreement sent to you for your completion.

### QUESTIONS?

Call: 306-966-5186

1-800-699-1907

Email: [giving@usask.ca](mailto:giving@usask.ca)