University Relations
Annual Giving
give.usask.ca

Donation Form

☑ **YES, I wish to support the University of Saskatchewan**

1 Your information

First Name: _____ **Middle Name:** _____

Last Name: _____

Address: _____ **City:** _____

Province: _____ **Postal code:** _____ **Country (if outside Canada):** _____

Email: _____ **Phone:** _____

2 Direct my gift to: *(you may select more than one option)*

- ☐ **USask Centennial Fund** (scholarships and bursaries for students in need)
- ☐ **Peer Health Initiative Fund** (supporting student wellness and peer-led mental health initiatives)
- ☐ **Nasser Family Emergency Fund** (helping students facing unexpected financial hardship)
- ☐ **College or department** _____
- ☐ **Other** (please specify): _____

If selecting more than one option, your gift will be distributed evenly unless you indicate otherwise.

3 My Gift

I would like to make:

☑ **A one-time gift**

☐ $50 ☐ $100 ☐ $200 ☐ $500 ☐ $1,000 ☐ $5,000 ☐ Other $_____

☐ **A recurring gift**

Frequency: ☐ Monthly ☐ Yearly Amount: $_____ Start date: _____

☐ Ongoing until I notify you ☐ End date: _____ Please withdraw on: ☐ 1st ☐ 15th

4 How I'd like to give

- ☐ Cheque (payable to University of Saskatchewan). Your gift will be directed to the fund(s) you select above.
- ☐ Pre-authorized debit (please attach a void cheque)
- ☐ Credit card - For a one-time or recurring gift, complete securely online at **give.usask.ca**.
  Please do not send credit card information by mail or email.
- ☐ I'd like to discuss giving options with someone — please contact me

Prefer to give by phone or set up a pledge (payment schedule)?
Call 306-966-5186 or 1-800-699-1907 (toll-free), Mon-Fri, 8:30 am - 4:30 pm

Need assistance?
306-966-1928 | gift.processing@usask.ca

5 In honour or memory (optional)

☐ In honour ☐ In memory Name: _____

☐ Do you give the University of Saskatchewan permission to release your name and address (dollar amounts not provided) to the surviving family or honoured individual?
Please notify (optional):

Name: _____ Email or mailing address: _____

6 Gift details (optional)

☐ Keep this gift anonymous ☐ Record this as a joint gift with my spouse: _____

7 Tax receipt

☐ Email ☐ Mail

8 Legacy giving (optional)

☐ I would like to learn more about leaving a gift in my will to the University of Saskatchewan

☐ I have already included USask in my will

9 Pre-Authorized Debit Agreement

By selecting pre-authorized debit, I authorize the University of Saskatchewan to debit my bank account for the amount and frequency indicated above.

- I may revoke this authorization at any time with at least 10 business days' notice.
- I have certain recourse rights if any debit does not comply with this agreement.
- To learn more about my rights, I may contact my financial institution or visit **www.cdnpay.ca**.

10 Authorization

Signature: _____ **Date:** _____ (MM/DD/YY)

Questions or comments

_____

_____

_____

Privacy: The University of Saskatchewan collects and uses your personal information in accordance with applicable privacy legislation. This information is used to process your gift, issue tax receipts, and keep you informed about university programs, services, and activities, including fundraising. If you do not wish to receive certain communications, you may opt out by contacting alumni.office@usask.ca or 1-800-699-1907.

Return your completed form

By mail:
University Relations | Annual Giving
University of Saskatchewan
G16 Thorvaldson Building
110 Science Place , Saskatoon, SK S7N 5C9

By email:
gift.processing@usask.ca

Thank you for your support.

Every gift—at any level—helps create opportunities for students across USask to learn and succeed.

Need assistance?
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give.usask.ca
Charitable Registration Number: 11927 9313 RR0001