

I understand the value of giving and would like to make a difference at Embry-Riddle by contributing to the Annual Fund through payroll deduction. I take pride in knowing that my gift is helping to build an even greater University:

I would like my gift designated to:

University Daytona Beach Campus Prescott Campus Worldwide

Worldwide Faculty/Staff Scholarship Fund

Unrestricted Fund Amount per pay period \$_____

Designated Fund Increase current pledge to \$_____

You may designate your gift for any academic department or program, the athletic department programs, the library, or for scholarships.

• Specify Designation _____ Amount per pay period \$_____

• Specify Designation _____ Amount per pay period \$_____

• Specify Designation _____ Amount per pay period \$_____

One time gift of \$_____ In addition to current pledge \$_____

Faculty  *And Staff Campaign*

Eagle Pride Begins Inside!

I understand that the amount accumulated by June 30 each year will determine my recognition status for the fiscal year. I also understand that this agreement will supersede all previous agreements on file, and that my gift will continue from year to year unless I change my deduction through the Development Office.

Name: _____

Title: _____

Department: _____ Ext: _____

E-mail Address: _____

Spouse Name: _____

Include spouse for recognition: Yes No

Home Address: _____

City: _____ St: _____ Zip: _____

Home Phone: _____

Signature: _____

(Required)

Date: _____ SS#: _____

(Optional)

Tell Us More About Yourself

Embry-Riddle Aeronautical University is proud of its alumni, friends, and parents. It is the responsibility of Advancement Systems to maintain accurate information on all our friends. We need your help! Please take a moment to complete this form. Our policy is to use this material for academic, alumni and development planning. We appreciate your cooperation. Thank you!

Name _____

Spouse name _____

Address _____

Address _____

Phone (H) _____ (W) _____

Phone (H) _____ (W) _____

Email address _____

Email address _____

Job title or occupation _____

Job title or occupation _____

Employer _____

Employer _____

Employer's address _____

Employer's address _____

Social Security # _____

Social Security # _____

Birthdate _____

Birthdate _____

Attended Embry-Riddle NO _____ YES _____

Attended Embry-Riddle NO _____ YES _____

Your degree _____ Year/Month _____

Your degree _____ Year/Month _____