



Pledge Letter of Intent

Name: _____

Address: _____

Phone: _____ Email: _____

Choose a Giving Option:

(1) I wish to make a one-time gift in support of the Sports Wall of Fame of \$_____ by:

- Cheque (enclosed) – *please make all cheques payable to the University of Alberta.*
- Credit Card

Card Type: Visa MasterCard Card #: _____ Exp: _____

Cardholder's Name: _____ Signature: _____

(2) I wish to make a monthly gift in support of the Sports Wall of Fame of \$_____ by:

- Cheque (enclosed) – *please make all cheques payable to the University of Alberta.*
- Credit Card:

Beginning _____ (mm/yy) until I indicate otherwise.

Beginning _____ (mm/yy) and ending _____ (mm/yy).

Card Type: Visa MasterCard Card #: _____ Exp: _____

Cardholder's Name: _____ Signature: _____

**Optional: I am making this gift in recognition of Wall of Fame Inductee: _____*

Please acknowledge this as a gift from myself and: _____ (please print)

Relationship (spouse, partner, parent, child, etc.): _____ (please print)

I do not wish to have my name included in any University of Alberta donor recognition programs.

Please forward your completed form to:

**Faculty of Physical Education & Recreation
W1-34 Van Vliet Centre, University of Alberta
Edmonton, AB T6G 2H9**



The personal information requested on this form is collected under the authority of Section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act for the purposes of raising philanthropic support for the University of Alberta. Questions concerning the collection, use or disposal of this information should be directed to: FOIPP Liaison Officer, External Relations, University of Alberta, 6-41 General Services Building, Edmonton AB, T6G 2H1, ph: (780) 492-0328, fax: (780) 492-1862. Charitable Registration # 108102831RR0001

