

Faculty and Staff Pledge Form



UMASS AMHERST

Name(s) (please print)

Campus Address(es)

Campus Phone

Home Phone

Signature

Date

As an investment in the University of Massachusetts Amherst, I/we commit to support the Faculty and Staff Campaign. Gifts may be designated to any area of campus or may be left unrestricted to benefit the greatest needs of UMass Amherst. My/our gift is to be designated to the following area(s):

Payroll Deduction Authorization Form

(Please allow two weeks for processing)

Yes, I authorize the Payroll Office to deduct the following amount from my wages for the UMass Amherst Faculty and Staff Campaign:

My biweekly deduction will be

\$100 \$50 \$35 \$25 \$10 \$5 \$2 other \$ _____

Please check one

Please continue biweekly deduction until otherwise instructed. State date ____/____/____

Total gift of \$_____ paid over _____ pay periods. Start date ____/____/____

Employee signature _____ Employee ID # _____ Date _____

I reserve the right to alter this commitment in the event of unforeseen circumstances.

Pay by check or credit card

Please make checks payable to UMass Amherst or fill in credit card information below.

Gift Amount \$ _____

UMass Amherst accepts VISA, MasterCard, and Discover credit cards.

Card number _____ - _____ - _____ - _____

Expiration date ____/____ CNV code _____

Signature _____

I prefer that my gift remain anonymous.

Please contact me about making my gift using appreciated securities.

Please contact me about:

life-income estate gifts

Gift in honor / memory of: _____

If you have any questions please call 545-5470

Return completed form to Records and Gifts Processing, Memorial Hall, 134 Hicks Way, Amherst, MA 01003