

University School

NOVA SOUTHEASTERN UNIVERSITY

Capital Campaign Gift/Pledge Form

Donor Information

Name(s): _____ Email: _____

Home phone: _____ Business phone: _____

Company/Foundation: _____
(if applicable)

Address: _____

City: _____ State: _____ Zip code: _____

Signature 1: _____ Date: _____

Signature 2: _____ Date: _____

Please keep this gift/pledge anonymous.

My company will match this gift/pledge. *

Gift/Pledge Information

I/we pledge a total of \$ _____ to be applied in its entirety to the Campaign for a New University School. This pledge will be fulfilled as follows:

A single gift. Payment information is below.

Annual payments of \$ _____ over 2 3 4 5 years starting _____ / _____
(circle one) (Month) (Year)

Check Information

Enclosed is my check for a tax-deductible gift of \$ _____ made payable to University School of NSU.

Credit Card Information

Please charge my tax-deductible gift to my credit card. American Express Master Card Visa

In the amount of \$ _____ Cardholder's Name: _____

Credit Card #: _____ Expiration Date: _____

Billing Address (if different from above): _____

Cardholder's Signature: _____ Date: _____

Naming opportunities requested and/or additional comments: _____

* Many companies offer matching gift programs that will double a donation's value. Check with your company to find out if they offer this benefit.

Please return to:

University School of NSU ~ Development Office
3301 College Avenue • Lower School • Fort Lauderdale, FL 33314-2398

phone: 954-262-4475 • fax: 954-262-3867 • Website: uschool.nova.edu