

# GIFTPLEDGE AGREEMENT

## DONOR INFORMATION

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Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

## DONATION INFORMATION

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Instructions: If you wish to make a gift, complete this page. If you wish to make a pledge, proceed to and complete page two.

\_\_\_\_\_

Other

Special Instructions

Check payable to *Webster University* enclosed.

OR

I wish to pay via Credit Card:    Visa    MasterCard    Discover

Card Number

Expiration Date (MM/DD)

Security Code (Last 3 digits on back of card)

Give Online at [webster.edu/giving](http://webster.edu/giving)

It's fast, easy and s

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Pledge Amount \_\_\_\_\_

Designation/Purpose \_\_\_\_\_

to be fulfilled/completed on or before \_\_\_\_\_ [date].

Payment frequency:    Monthly      Quarterly      Annually      Payroll      Estate

The first gift of this pledge shall be on or before \_\_\_\_\_ [date].

**I / my spouse work for a matching gift company.**