



GIVE TO EMORY

Advancement and Alumni Engagement, Office of Gift Accounting 1762 Clifton Road, Suite 2400, Atlanta, Georgia 30322
PHONE: 404.712.GIVE (4483) | GIVE ONLINE: together.emory.edu/givetoday

YES! I want to provide critical support for Emory's schools and units, I have enclosed a gift of (check one):

\$100 \$250 \$500 \$1,000 \$2,500 Other \$ _____

I would like to pledge this amount to be paid before August 31.

Please complete the pledge payment schedule (shown right) to indicate when we should remind you of your pledge.

Name: _____

Home Address: _____

City/State: _____ Zip: _____

PAYMENT INFORMATION:

To make your gift by check, credit card, or bank transfer, please see below.

Gifts to Emory University are tax-deductible to the extent provided by law. Emory's fiscal year is September 1 to August 31.

CHECK: I have enclosed a check for \$ _____ payable to Emory University.

CREDIT CARD: I prefer to charge my gift to my credit card.
(Please enter your number below or visit together.emory.edu/givetoday)

Credit Card Type: Mastercard® Visa® American Express®

Card Number: _____

Expiration Date: _____

Signature (required): _____

BANK TRANSFER: I wish to make a gift by direct electronic funds transfer (EFT) from my checking or savings account.

Instructions: Download the EFT form at together.emory.edu/giving and send it with a voided check to:

PLEASE REMIT TO:

Office of Gift Accounting
Emory University
1762 Clifton Road, Suite 2400
Atlanta, GA 30322

PHONE: 404.712.GIVE (4483)

GIVE ONLINE:
together.emory.edu/givetoday

MATCHING GIFT PROGRAM:

Double or triple the value of your gift to Emory through an employee matching gift. Many companies will match higher education donations of current employees, retirees, and their spouses. Visit together.emory.edu/matching-gifts to learn more.

PLEASE UPDATE YOUR RECORDS AS NECESSARY:

Use the section below or visit 2036emory.com/pledgeform

Name: _____

Home Address: _____

City/State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Home Email: _____

Which is your preferred address? (check one) Home Work

Employer: _____ Title: _____

Business Address: _____

City/State: _____ Zip: _____

Work Phone: _____ Work Email: _____

PLEDGE PAYMENT SCHEDULE:

Please enter the amount of your personal gift, not including matching funds.

September \$ _____ March \$ _____

October \$ _____ April \$ _____

November \$ _____ May \$ _____

December \$ _____ June \$ _____

January \$ _____ July \$ _____

February \$ _____ August \$ _____

TOTAL PLEDGE: \$ _____

PLEASE CREDIT MY GIFT TO:

Business School \$ _____

Emory College \$ _____

Graduate School \$ _____

Health Professions \$ _____

Law School \$ _____

Medical School \$ _____

Nursing School \$ _____

Oxford College \$ _____

Public Health \$ _____

Theology School \$ _____

General University \$ _____

Other \$ _____

If other, _____ please specify: _____

Athletics & Recreation \$ _____

Campus Life \$ _____

Center for Ethics \$ _____

Emory Healthcare \$ _____

Emory National Primate Research Center \$ _____

Michael C. Carlos Museum \$ _____

University Libraries \$ _____

Winship Cancer Institute \$ _____

SCHOOLS

UNITS

INVEST IN EMORY'S MISSION:
together.emory.edu/giving

PLEASE SEND ME INFORMATION ABOUT:

Gifts that pay me income for life (charitable annuities and trusts)

Gifts of real estate

Including Emory in my will, trust, or estate plans

Naming Emory the beneficiary of my IRA or life insurance

Creating a named scholarship or other endowment fund at Emory

The Wise Heart Society (leadership giving)

Other _____

IS EMORY INCLUDED IN YOUR ESTATE PLANS?

Please send me information about the 1836 Society (Emory's legacy giving society).