



Center for Women at Emory
569 Asbury Circle
Atlanta, Georgia 30322
404.727.6123
www.womenscenter.emory.edu

Become a Friend of the Center for Women at Emory.

There are many ways to support our work with your gifts.

- Donate online at womenscenter.emory.edu.
- Mail this form along with your check payable to **Emory University**.
- Pay by credit card by filling out and mailing this form.
- For Emory employees, visit emory.edu/myemory/ways-to-give to learn about payroll deduction.

Membership Levels:

- | | | | | | |
|-----------------------------------|----------|-------------------------------------|---------|--|-------|
| <input type="checkbox"/> Angel | \$10,000 | <input type="checkbox"/> Visionary | \$1,000 | <input type="checkbox"/> Sponsor | \$100 |
| <input type="checkbox"/> Guardian | \$5,000 | <input type="checkbox"/> Benefactor | \$500 | <input type="checkbox"/> Member | \$50 |
| <input type="checkbox"/> Advocate | \$2,500 | <input type="checkbox"/> Patron | \$250 | <input type="checkbox"/> Emory Student | \$10 |

Name _____

Home Address _____

City/State/Zip _____

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

(Please complete the payment schedule on the reverse side to indicate when we should remind you of your pledge.)

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

To charge your gift or utilize other payment options, please see the reverse side of this form. The fiscal year begins September 1 and ends August 31.

Gifts are tax-deductible to the extent provided by law.

Please remit to:
Office of Gift Records
Emory University
1762 Clifton Road NE
Suite 1400, MS: 0970-001-8AA
Atlanta, GA 30322-4001
Phone: 404.727.0068 Fax: 404.727.4876
Email: eurec@emory.edu

I prefer to charge my gift to my credit card. (Please enter your number below or visit www.emory.edu/give)

Mastercard®  Visa®  American Express® 

Card Number _____-_____-_____-_____-_____

Expiration Date _____

Signature (required) _____

I wish to make my gift by direct electronic funds transfer (EFT) from my checking or savings account. (*You will be mailed an authorization form.*)

MATCHING GIFT PROGRAM

If you work for a company that matches gifts to higher education, you can double or triple the value of your contribution by following your employer's matching gift procedures. Many companies match the gifts of spouses, retirees, and surviving spouses of retirees in addition to gifts from current employees. Please contact your personnel or human resources office for eligibility information and to obtain a matching gift form.

Please update your records as necessary:

You may use the section below or visit <https://www.alumni.emory.edu/updateinfo.php>

Name _____

Home Address _____

City/State/Zip _____

Home Phone _____ Cell Phone _____

Home Email _____

Which is your preferred address? Home Business

Employer _____ Title _____

Business Address _____

City/State/Zip _____

Business Phone _____ Bus. Email _____

PLEDGE PAYMENT SCHEDULE

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

September	\$ _____
October	\$ _____
November	\$ _____
December	\$ _____
January	\$ _____
February	\$ _____
March	\$ _____
April	\$ _____
May	\$ _____
June	\$ _____
July	\$ _____
August	\$ _____
Total Pledge	\$ _____

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 Adopt-a-Scholar program at Emory
- Other _____

Is Emory included in your estate plans?

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