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19GEN

Please complete this form in its entirety and return it to the Office of Advancement Operations.

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EVERY AGGIE. EVERY YEAR.

Prefix First Middle Last Suffix

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Spouse Full Name (Prefix, First, Middle, Last, Suffix) Spouse's Class Year (if an A&T alumnus/a)

I am an A&T alumnus/a. Class Year: Major: Degree:

Chapter Affiliation

This is a joint gift with my spouse. Check here if you wish to make your gift anonymous.

This gift is in honor/memory of

MY/OUR TOTAL GIFT TO A&T IS \$

GIFT PAYMENT OPTIONS

Cash/Check (Checks made payable to: North Carolina A&T Foundation, Inc.)

Debit/Credit Card Visa MasterCard American Express

Card Number: Expiration Date: Security Code:

Bank Draft (Please attach a voided check that contains your bank information)

Pledge (Please fulfill your pledge by June 30 to receive credit for the current fiscal year)

My debit, credit card, or bank draft gift is a:

Lump sum one-time contribution of \$

Monthly contribution of \$ to be drafted on the 1st 5th 15th 30th beginning in

(please indicate month)

Please draft my gift: For month(s) -OR- Until written notification.

Stock/Securities Transfer Please call 336-334-7600.

I have included A&T in my estate plans or I would like information on how to do so.

Matching Gift My employer's matching gift form is enclosed or will be sent.

Table with 2 columns: GIFT DESIGNATION(S), AMOUNT. Includes a TOTAL row.

Signature Date

A signature is required for all debit, credit card, and bank draft gifts.