



LAMBDA CHI ALPHA

Contact Information

Name(s): _____

Phone: _____ Email: _____

Recognition

For donor recognition, I understand my name will be listed as I have written above.

I wish to remain anonymous

This gift is in honor of: _____

Crescents may also be recognized. If a Crescent should be recognized for this gift, write her name below:

Gift Information

Current pledge total: \$ _____

Current pledge schedule:

2021 \$ _____ 2022 \$ _____ 2023 \$ _____ 2024 \$ _____ 2025 \$ _____ 2026 \$ _____ 2027 \$ _____

Revised pledge total: \$ _____

Revised pledge schedule:

2021 \$ _____ 2022 \$ _____ 2023 \$ _____ 2024 \$ _____ 2025 \$ _____ 2026 \$ _____ 2027 \$ _____

I have interest in including Lambda Chi Alpha in my estate or have already done so.

If checked, a member of our team will contact you to discuss your specific interest(s).

Payment Information

I wish to pay by credit card. Credit cards will be charged August 22 of each year, unless otherwise requested.

Card number: _____

Expiration date: _____ Security code: _____

I wish to pay using bill pay.

To set up bill pay, please contact your financial institution and provide the "pay by check" information given below.

I wish to pay by check

*Please make payable to the Alpha Gamma Zeta House Corporation, noting 'Alpha Gamma Zeta Housing Campaign' in the memo, and return to **randy.sorensen@calibernetworksolutions.com**. Make payments to: **Randy Sorensen, Treasurer, 1317 Helford Lane, Carmel, IN 46032**. Gifts to the House Corporation are not tax deductible.*

Signature

Date

Thank you for your pledge!