

## CAPITAL CAMPAIGN EMPLOYEE COMMITMENT FORM

Employee Name \_\_\_\_\_ Employee ID# \_\_\_\_\_

Street Address \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

### PLEDGE INFORMATION

**YES**, I (we) want to contribute to the Baptist University **“A Healthier Tomorrow”** Campaign

I (we) have enclosed a gift of \$

I (we) wish to pledge this amount total \$

\$ \_\_\_\_\_ to be paid \_\_\_\_\_ monthly \_\_\_\_\_ quarterly \_\_\_\_\_ annually

I would like to donate PTO hours totaling \_\_\_\_\_ (# of hours)

I would like to donate per payroll giving \$ \_\_\_\_\_ per pay period \$ \_\_\_\_\_ one time deduction

Please direct my gift towards **[insert fund name or specific purpose, i.e. “scholarships” below]**

### PAYMENT INFORMATION

**I plan to make my contribution in the form of:**

\_\_\_\_\_ stock \_\_\_\_\_ check \_\_\_\_\_ credit card \_\_\_\_\_ stock \_\_\_\_\_ electronic funds transfer from bank account

Please charge my gift to \_\_\_\_\_ VISA \_\_\_\_\_ MASTERCARD \_\_\_\_\_ DISCOVER \_\_\_\_\_ AMERICAN EXPRESS

Card # \_\_\_\_\_ Exp Date \_\_\_\_\_ CVV \_\_\_\_\_

Name on Card \_\_\_\_\_ Signature \_\_\_\_\_

**To make your credit card donation online or set up your EFT payment online, click our secure link below or use the QR Code Provided [Baptist University “A Healthier Tomorrow” Campaign Donation Form](#)**



### ACKNOWLEDGMENT INFORMATION

In any recognition, I would like my (our) names to be listed as

I would like to remain anonymous

I would like to make this gift in honor/memory of