



GIFT INTENT FORM

Contact Information:

Name(s): _____ Class Year: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Gift Information:

___ \$15,000 ___ \$10,000 ___ \$5,000 ___ \$2,500 ___ \$1,000

___ \$750 ___ \$500 ___ \$250 ___ \$100 ___ Other

Payment Schedule:

I/we intend to give the sum of \$ _____ toward the AC Fund over the next _____ years. I/we hope to follow the schedule below:

2012-13 \$ _____ 2013-14 \$ _____ 2014-2015 \$ _____ 2015-2016 \$ _____ 2016-2017 _____

Please send me a reminder during the month of: _____

Payment Information:

___ I have enclosed my check, payable to *Adrian College*

___ EFT: Please deduct \$ _____ per month until written notice is received (Please contact development office)

Note: to use Electronic Funds Transfer (EFT), please complete the EFT form in addition to the Gift Intent Form. The EFT form can be found by clicking [here](#).

___ Please charge my gift to the credit card below:

___ Visa ___ MasterCard ___ Discover ___ AMEX

Credit Card Number: _____ Exp: _____

Signature (required): _____

Contributions are deductible for tax purposes to the full extent of the law. Please make checks payable to Adrian College. For gifts of securities, please contact Adrian College's Office of Development at 888-691-0008.