



ASHOKI SUJANANI SCHOLARSHIP PLEDGE FORM

CONTACT INFO:
506.453.5120
devdr@unb.ca
unb.ca/donations

PERSONAL INFORMATION

First Name _____ Middle Initial _____ Last Name _____
Address _____ City _____ Province/State _____
Country _____ Postal/Zip Code _____
Phone _____ Email _____

- I would like this to be considered a joint gift between myself and _____
 I do not want my name to appear in UNB's annual donor honour roll

PAYMENT OPTIONS

Total Gift of: \$ _____ to be paid by:

- Cheque (payable to UNB)
 Pre-authorized Bank Withdrawal (contact Annual Giving Office at 506.453.5120 for assistance)
 Visa Mastercard American Express
Credit Card No.: _____ Expiry: _____

Amount Enclosed \$ _____

If applicable, I would like to fulfill the remainder of my Gift through:

- Monthly Quarterly Semi-Annual
instalments of \$ _____, commencing on ____ (day) ____ (month) ____ (year).

ONLINE PAYMENT OPTION

You can make your gift online by visiting <https://eservices.unb.ca/ecommerce/donations/>

IMPORTANT: Please type "Ashoki Sujanani Scholarship" in the Other - Specific Donation Details section of the online form (*see specimen below*):

Other - Specific Donation
Details:

Ashoki Sujanani Scholarship

PLEASE SIGN AND DATE

Signature _____ Date _____