

ROSEMONT  
COLLEGE

PLEDGE FORM

DATE:  
NAME:  
ADDRESS:

CLASS YEAR:

CASH GIFT: (By June 30<sup>th</sup>)

- Check made payable to Rosemont College
- Credit Card with credit card information, security code, and expiration date (Payment Method
- Below) Recurring Automatic Payments – Scheduled monthly (1<sup>st</sup> or 15<sup>th</sup>), quarterly, annually (circle one)
- Gift of Stock

PLEDGE GIFT:

I agree to pledge a total of \$ \_\_\_\_\_ to Rosemont College Experience Fund.

- I wish to make a one-time gift to Rosemont College on \_\_\_\_\_ (date).
- I wish to make a multi-year pledge to Rosemont College over \_\_\_\_\_ years.

PAYMENT SCHEDULE:

I would like to pay my pledge/gift in the following way:

- Annual installments  Quarterly installments  Monthly installments (1<sup>st</sup> or 15<sup>th</sup>)
- Installments of \$ \_\_\_\_\_. Beginning date of first payment \_\_\_\_/\_\_\_\_/\_\_\_\_\_.

PAYMENT METHOD:

Please make checks payable to Rosemont College.

Automatic Bank Withdrawal:

Routing #: \_\_\_\_\_ Bank Acct. #: \_\_\_\_\_

Credit Card Payment:

Card Type: \_\_\_\_\_ Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_ Card Expiration Date: \_\_\_\_/\_\_\_\_ Security: \_\_\_\_

CORPORATE MATCHING GIFT:

- My pledge/gift will be increased with matching gift funds from: \_\_\_\_\_.
- I wish to make a match gift pledge of \$ \_\_\_\_\_ to Rosemont College over \_\_\_\_\_ years.

PLANNED GIFT:

- Rosemont College is included in my will. Documentation will be forthcoming.

FOR THE PURPOSE OF RECOGNITION:

- Please list my name as it appears above.
- Please list my name as: \_\_\_\_\_
- I wish to remain anonymous for my gift and pledge payments.

Thank you!

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please send payments to Helen Sciubba, Office of Advancement, 1400 Montgomery Avenue, Rosemont, PA 19010.