

I/We wish to make a pledge to Denison with the understanding that it will count as part of our Class Gift.
(Pledges through the fiscal year ending June 30, 2029 count in the Class Gift.)

NAME(S) _____ ID _____

ADDRESS _____

CITY, STATE, ZIP _____

EMAIL _____ PHONE _____

GIFT OR PLEDGE

| I/We pledge the following: | Annual Fund | Class of 1974 Endowed Scholarship Fund | Other* (please detail below) | Total |
|------------------------------|-------------|--|------------------------------|----------|
| By June 30, 2024 | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| July 1, 2024 - June 30, 2025 | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| July 1, 2025 - June 30, 2026 | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| July 1, 2026 - June 30, 2027 | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| July 1, 2027 - June 30, 2028 | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| July 1, 2028 - June 30, 2029 | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| Total | \$ _____ | \$ _____ | \$ _____ | \$ _____ |

This gift is being made in honor/memory of _____

*Other Designation _____

Payment Method

- Enclosed is my/our check, payable to Denison University, in the amount of \$ _____ I/We will make my/our gift online at alumni.denison.edu/1974
- Please charge my/our credit card in the amount of \$ _____

Credit Card Number _____ Exp. Date (MM/YY) _____ CVV _____

Name as it appears on card _____

Cardholder's Signature _____ Date _____

- I/We authorize Denison University to charge my credit card for subsequent pledges on the anniversary of my initial payment
- I/We will pay the remainder of my pledge by check or credit card, please send me reminders when appropriate

ADDITIONAL INFORMATION

- I/We (please check all that apply):
- Have created a gift benefitting Denison in my estate plan and haven't yet notified the university. Please contact me to ensure Denison can achieve my goals and my generosity can be included in the Class Reunion Gift.
 - Would like more information about creating a gift in my estate plan to benefit Denison.
 - Would like more information about gift options designed to pay income to myself or loved ones.

Donor One Signature _____ Date _____ Donor Two Signature (if applicable) _____ Date _____