

# Gift Form

## STEP 1: PERSONAL INFORMATION

\* indicates a required field

Prefix:  Mr.  Mrs.  Ms.  Dr.  None If other, please specify

\*First Name  Middle Initial

\*Last Name

\*Street Address (to mail tax receipt)

\*City

\*Province/State/Region

\*Postal/Zip Code

\*Country

\*Email

\*Home Phone

Name of Company

Job Title

Business Phone

## STEP 2: GIFT DETAILS

I'd like to make  a new gift  a payment on an existing pledge

Currency  CAD funds  US funds Transactions are converted to Canadian currency

Ongoing/Recurring Gift \$  per month \*\*

One-Time Gift \$

\*\*Please contact us to cancel or change your monthly gift.

Find out if your employer matches donations at [matchinggifts.com/canada/uwaterloo](http://matchinggifts.com/canada/uwaterloo).

In Honour of

In Memory of

I would like to remain anonymous.

## STEP 3: GIFT DESIGNATION

- I wish to support the Waterloo Fund (unrestricted support).
- I wish to support a project or program in a specific faculty, school, college, or elsewhere on campus.

Please indicate the amount you would like to give to one or more areas:

Amount	Area of Support
\$ <input type="text"/>	<input type="text"/>
\$ <input type="text"/>	<input type="text"/>
\$ <input type="text"/>	<input type="text"/>

Please complete this form and mail or fax it to:  
University of Waterloo, Office of Advancement  
200 University Avenue West, Waterloo, Ontario, Canada N2L 3G1  
Fax: 519-746-8932



## STEP 4: PAYMENT OPTIONS (please check one)

Cheque (payable to the University of Waterloo)

Pre-authorized debit (PAD)\* agreement (please enclose a void cheque)

Signature

Payroll or pension deduction (for Waterloo staff, faculty, and retirees ONLY)

Please deduct \$  per pay\*\*

Signature

Monthly gifts made by pre-authorized debit will be deducted on the first business day of each month

## LEAVE A LEGACY

The Laurel Society honours those who have decided to leave a legacy at Waterloo.

I am pleased to inform you I have made provisions for Waterloo through a bequest in my will or through another asset (e.g. life insurance)

Please send me information on bequests and legacy giving

## ARE YOU A WATERLOO ALUMNUS?

As a Waterloo graduate, I would like to:

Learn more about alumni perks and services available to me

Receive the alumni monthly e-newsletter (please provide email address in contact form)

Receive invites to alumni events

Affiliation to Waterloo: (please check all that apply)

Waterloo Alumni

If yes, student number

Parent of Student or Graduate

If yes, student's name(s) and program(s)

Faculty, Staff, or Retiree

Friend of Waterloo

## THANK YOU FOR YOUR GIFT!

Questions?

Email: [annualgiving@uwaterloo.ca](mailto:annualgiving@uwaterloo.ca)

Phone: 1-800-408-8715

\* I may revoke my authorization at any time, subject to providing notice of 30 days. I have certain rights if any debit does not comply with this PAD agreement (e.g. I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this agreement. To obtain more information on my recourse rights, to obtain a cancellation form, or for more information on my rights to cancel a PAD agreement, I may contact my financial institution or visit [cdnpay.ca](http://cdnpay.ca).

\*\* Please contact us to cancel or change your monthly gift.

At Waterloo, we respect your privacy and keep your information strictly confidential. Read our privacy policy at [uwaterloo.ca/support/privacy-policy](http://uwaterloo.ca/support/privacy-policy). A tax receipt will be mailed to you once your donation is processed. Monthly donations receive a single tax receipt in February each year. Donations qualify for income tax credits. Charitable Registration No. 119260685RR0001