EMINENT ASSOCIATES APPLICATION FORM

Name _____ Grad Year: _____ Email Address: _____
Address: _____ Spouse: _____ Grad Year: _____
City: _____ State: _____ Zip Code: _____ Cell Phone: _____
Home Phone: _____ Cell Phone: _____

PLEDGE INFORMATION

☐ One Time Gift: $_____
☐ Recurring Gift: $_____ Payment Schedule: ☐ Monthly ☐ Quarterly ☐ Annually
_____ Number of Installments
$_____ Total Amount of Gift

EMINENT ASSOCIATES ENTRY LEVEL

☐ $1,000–$9,999: Associate Level
☐ $10,000–$24,999: Presidential Associate Level
☐ $25,000–$49,999: Silver Presidential Associate Level
☐ $50,000–$99,999: Gold Presidential Associate Level
☐ $100,000 and above: The Founders' Circle

MATCHING GIFT INFORMATION

Employer: _____ Will your employer match your gift? ☐ Yes ☐ No
I will complete the matching gift form from my company so that my gift to TU can be increased. ☐ Yes ☐ No

FULFILLMENT INFORMATION

☐ Cash ☐ Check ☐ Tiger Draft ☐ Credit Card

CREDIT CARD FULFILLMENT
Name Associated with Card: _____
Credit Card Number: _____
Exp. Date: _____ CVV Code: _____

TIGER DRAFT FULFILLMENT
Bank Name: _____
Routing Number: _____
Account Number: _____

PUBLIC RECOGNITION

Tuskegee University may publicly acknowledge my gift. How would you like to be listed? _____

AGGREEMENT

My signature below confirms my decision to make a charitable gift or pledge to Tuskegee University, and if requested, my authorization to charge my debit/credit card or draft my bank account until my pledge is fulfilled.

_____ _____ _____ _____
Signature Date Signature Date

OFFICE OF DEVELOPMENT & ALUMNI ENGAGEMENT | 1200 W. Montgomery Rd P. O. Box 1304, Tuskegee, AL 36087 | Email: CONTRIBUTIONS@TUSKEGEE.EDU | Phone: 334 727 8760