

**I am pleased to
support UNBC!**

Name

Business Name

Mailing Address

City **Province** **Postal Code**

Phone

Email

I'm a UNBC: Supporter Alumni Founder Faculty / Staff Member

This gift is In honour In Memorial Of: _____

I/we wish to remain anonymous (no public recognition) For this gift For all gifts

Single Gift \$ _____

Monthly Gift (By credit card. Processed on the 15th every month) **Monthly Amount** \$ _____ **Start Month** _____

Please direct my gift to:

Opportunity Fund (unrestricted) **Timberwolves Athletics** **Other** _____

Scholarships & Bursaries **Northern Medical Programs Trust**

Cheque (Payable to UNBC) **VISA** **MC** **AMEX**

Name on Card

Card Number

Expiry Date

Signature

Today's Date

Thank you for your support!

I would like more information on:

Establishing a named award

Giving securities

Remembering UNBC in my will