



First Name _____ M.I. _____ Last Name _____

Department _____ Bronc ID _____

Home Address _____

City _____ State _____ Zip _____

Please indicate if New, Add, Change, or Cancellation: New Add Change Cancel

INDICATE WHERE YOU WOULD LIKE YOUR GIFT DESIGNATED:

The Rider Fund

Funding allows Rider to admit the best undergraduate students regardless of their financial need.

Gift Amount: \$ _____

Special Instructions: _____

Other Designation

Make a gift to the department or area you are most passionate about at Rider:

Designation: _____

Gift Amount: \$ _____

PAYROLL DEDUCTION

Please deduct \$_____ from each paycheck, beginning with my next paycheck. I understand that this will continue until I notify the payroll office of a change.

Please deduct \$_____ per paycheck, beginning with my next paycheck, for a total gift of \$_____.

Signature _____

(Required for payroll deduction authorization)

ADDITIONAL WAYS TO MAKE A DIFFERENCE:

I have included Rider University in my estate plans.

My gift will be matched by my spouse's company. _____

CORPORATE MATCHING GIFTS

Many companies match donations made by employees, their families, and retirees. Please ask your spouse's human resources office for their company's matching gift form or online submittal website. Mail the form (if applicable), your gift, and this pledge form to Rider University and have an even greater impact on Rider University, our students, and our faculty. More information regarding corporate matching gifts is available online at www.rider.edu/give.

Please return your completed form to the Office of Annual Giving, Rider University, Moore Library, Suite 137

Questions? Contact Gabriella Hill at hillga@rider.edu or (609) 896-5108.

FOR INTERNAL USE ONLY

DATE RECEIVED:		TO DISBURSEMENTS ON:	
BEGINNING IN MONTH:	DEDUCTION PER PAYCHECK:	RE FUND:	FOAPAL: