



REUNION GIVING

EVERY SPIDER, EVERY YEAR.

1 In honor of my reunion, I wish to support the University of Richmond with a multi-year gift to:

Fund designation(s)

Schedule: \$_____ paid by June 30, 2024

\$_____ paid by June 30, 2025

\$_____ paid by June 30, 2026

\$_____ paid by June 30, 2027

\$_____ paid by June 30, 2028

Total: \$_____

2

Select one:

- Charge my credit card annually
- Send me a reminder for my pledge

3

Select the month you would like to be charged or reminded:

- March June Sept Dec

*The University's fiscal year runs July 1-June 30

4

Payment Information

Select one:

- Enclosed is the first payment by check payable to University of Richmond.
- Charge my**: American Express Mastercard VISA Discover

****Please do not send credit card info by email. Credit cards should only be provided by mail or phone.**

Name as it appears on card

Card Number

Expiration Date

5

Your Information

Printed Name

Class Year

Signature

Date

Preferred Address

City, State Zip

Preferred Phone: Cell Home Business

Preferred Email

This is a joint gift. Also credit: _____
Spouse Name and Class Year

This gift is in honor memory of: _____

Matching Gifts: To find out if your employer or your spouse's employer will match your gift, contact the company's human resources department or email matchinggifts@richmond.edu.

Return your completed form to:

Office of Annual Giving • Bostwick House #2 • University of Richmond, VA 23173 Contact: (804) 289-8050