

Please complete the following information and mail your gift to the address below.

Office of Gift Acceptance  
4603 Calvert Road  
College Park, MD 20740-3421

### Choose Your Amount

All gifts to the University of Maryland are tax deductible as allowed by law and create invaluable experiences for current and future Terps. See your tax advisor for details.

Please accept my total gift of:

**\$1,000   \$500   \$250   \$150   \$50**

OTHER: \$ \_\_\_\_\_

### Designations

Please designate my gift to:

DESIGNATION	AMOUNT
<input type="checkbox"/> President's Fearless Fund	\$ _____
<input type="checkbox"/> School/College of _____	\$ _____
<input type="checkbox"/> Department of _____	\$ _____
<input type="checkbox"/> Libraries	\$ _____
<input type="checkbox"/> Clarice Smith Performing Arts Center	\$ _____
<input type="checkbox"/> Keep Me Maryland (Scholarships)	\$ _____
<input type="checkbox"/> Student Affairs	\$ _____
<input type="checkbox"/> Athletics (Terrapin Club)	\$ _____
<input type="checkbox"/> Other _____	\$ _____

### Membership Options

- Single**    Annual • \$55  
 3-Year • \$108  
 Lifetime • \$850  
 Lifetime Installment Plan •  
5 Annual Payments of \$210
- Joint**    Annual • \$70  
 3-Year • \$168  
 Lifetime • \$950  
 Lifetime Installment Plan •  
5 Annual Payments of \$240

**Total Gift & Membership Amount** \$ \_\_\_\_\_

Gifts in support of the University of Maryland are accepted and managed by the University of Maryland College Park Foundation, Inc., an affiliated 501(c)(3) organization authorized by the Board of Regents. Contributions to the University of Maryland are tax deductible as allowed by law. Please see your tax advisor for details.

### Contact Information

Name: \_\_\_\_\_ Graduation year: \_\_\_\_\_

Grad. College/School: \_\_\_\_\_

Spouse/Partner Name: \_\_\_\_\_ Graduation year: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

This is my preferred mailing address

Home Phone: \_\_\_\_\_ Home Email: \_\_\_\_\_

This is my preferred phone number    This is my preferred email address

Spouse/Partner Email: \_\_\_\_\_

### Business Information

Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

This is my preferred mailing address

Work Phone: \_\_\_\_\_ Work Email: \_\_\_\_\_

This is my preferred phone number    This is my preferred email address

Spouse/Partner Employer: \_\_\_\_\_

Spouse/Partner Job Title: \_\_\_\_\_

Spouse/Partner Email: \_\_\_\_\_

### Payment Information

#### Check

Make check payable to UMCPE

#### Credit Card

Charge my credit card \$ \_\_\_\_\_ for the next \_\_\_\_\_ months for a total gift of \$ \_\_\_\_\_.

**OR**

Charge my credit card for a one-time payment of \$ \_\_\_\_\_.

Card Number: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Expiration Date (required): \_\_\_\_\_ Zip Code (required): \_\_\_\_\_

Signature (required): \_\_\_\_\_

**Make your gift online at [www.giving.umd.edu](http://www.giving.umd.edu).**

#### Matching Gift

My / My spouse's company will match my gift.

Company's Name: \_\_\_\_\_

*For more information on matching gifts, or to find out if your company will match your gift, please visit our online directory at [www.mdexcellence.umd.edu/match](http://www.mdexcellence.umd.edu/match)*