

West Virginia Wesleyan College Faculty/Staff Pledge Form

Total amount of pledge \$ _____

Name (s): _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Please mark all that apply:

_____ Faculty _____ Staff _____ Alumnus/a Class of _____ Parent (Class Yr. _____)

Direct my gift to: Wesleyan Fund Other: _____

Further instructions: _____

METHOD OF PAYMENT

Check

Enclosed is a check in the amount of \$ _____

(Please make checks payable to West Virginia Wesleyan College)

Credit Card

Please charge to my:

___ Visa ___ Master Card ___ American Express ___ Discover

Signature _____

Card Number: _____ Exp. Date: _____

Electronic Funds Transfer

I authorize West Virginia Wesleyan College to deduct on the 15th of every month the following amount from my checking account: \$_____ (\$10 monthly minimum)

PLEASE ENCLOSE A VOIDED CHECK FOR BANK ACCOUNT INFORMATION

I understand that electronic fund transfers will continue for a period of 12 months unless I notify the Institutional Advancement Office, in writing, of any changes or cancellations.

Signature: _____ Date: _____

(To make your gift through payroll deduction please complete the information on the reverse side of this form)

(Over)

Payroll deduction

Payroll Deduction
(Assignment of Wages)

\$ 25 gift is \$1.04 per pay period	\$100 gift is \$4.17 per pay period	\$ 500 gift is \$20.84 per pay period
\$ 50 gift is \$2.09 per pay period	\$250 gift is \$10.42 per pay period	\$1,000 gift* is \$41.67 per pay period

*Gifts of \$1000 or more annually qualify for membership in the Wesleyan Society.

STATE OF WEST VIRGINIA

COUNTY OF UPSHUR

I, _____ (employee), hereby assign to West Virginia Wesleyan College future wages due me from the College in the amount of *\$ _____ per semimonthly payroll. I understand that this payroll deduction will continue for 12 months unless I notify the Institutional Advancement Office, in writing, of any changes or cancellations.

Employee Signature

Taken, subscribed and sworn to before me this _____ day of _____, 20____.

My commission expires: _____.

Notary Public

- Three-fourths of earnings for each pay period less deductions are exempt from all wage assignments. Wage assignments are paid in the order of the date they are signed.

Accepted by West Virginia Wesleyan College on this _____ day of _____, _____

Employer Authorized Signature

By: _____

Title: _____