



CANISIUS UNIVERSITY

CANISIUS FUND

P.O. Box 8000
Department 177
Buffalo, NY 14240-9920
canisius.edu/give
1.800.201.4952

COMING TOGETHER WHEN THE NEED IS GREATEST

Annual gifts to Canisius are vital to the future of the university and honor the commitment we have made to current Griffins. Your gift provides resources that support all facets of a Canisius education by providing essential funding for scholarships, academic and athletic excellence and distinguished learning experiences that animate our Jesuit educational mission. Thank you!

FULL NAME (PLEASE PRINT ABOVE)

ADDRESS CITY STATE ZIP

EMAIL ADDRESS BUSINESS HOME PHONE NUMBER BUSINESS HOME CELL

- Yes, I/we wish to invest in a student's education and experience by supporting the Canisius Fund.**
 - Canisius Fund (to be used where the need is greatest) \$ _____
 - In addition, I/we would like to support: _____ \$ _____

PAYMENT/PLEDGE OPTIONS (Make your gift anytime at canisius.edu/give)

- Credit Card Payment: Visa Mastercard Discover American Express
 - Single Payment
 - Enroll me in the monthly giving program with monthly payments of \$ _____
 - Recurring (until I notify Canisius otherwise)
 - For _____ months
- Enclosed is a check (to be made payable to Canisius College) in the amount of \$ _____
- Multi-year pledge of \$ _____ for the next _____ years.
- You will be billed at the beginning of the next month if no preferred schedule is indicated. Please bill me in month(s): _____
- My employer/spouse's employer will match my/our gift. Name of gift matching company: _____
- I have enclosed my matching gift form or applied for my match online.

CARD NUMBER EXP. DATE CVV # (REQUIRED)

NAME ON CARD SIGNATURE