

Gift and Dues Form for The Alpha Delta Phi at Cornell Alumni Corporation

- JOHN BROOKE '57 FUND \$2,500
Contributors receive a gold commemorative ΑΔΦ lapel pin. Use of funds may be designated. Payments within a five-year period qualify.
 - FOUNDERS SOCIETY \$500
 - JUDGE JAMES E. RICE JR. '30 CLUB \$250-\$499
 - LITERARY CIRCLE \$100-\$249
 - REGULAR ALUMNI MEMBERSHIP (for alumni who graduated more than five years ago) \$75
 - YOUNG ALUMNI MEMBERSHIP (for alumni who graduated in the last five years) \$35
 - ADDITIONAL CONTRIBUTION (for confidence in / appreciation for current collegiate programs and performance) \$ _____
- TOTAL AMOUNT ENCLOSED \$ _____

Charge your contribution if you wish; provide your account number and expiration date below.

Visa MasterCard (check one) Card # _____

Amount \$ _____ Exp. Date _____ Signature _____

To pay by check: Please make check payable to *Alpha Delta Phi at Cornell, Inc.*, and send to Alumni Records Office, Alpha Delta Phi, P.O. Box 876, Ithaca, NY 14851-0876. Contributions are not deductible as charitable donations for federal income tax purposes.

Name (please print) _____ Class _____
 Address _____
 Phone (h) _____ (w) _____
 E-mail address _____

To pay your dues automatically every January, please fill out the form below:

ANNUAL Automatic DUES PAYMENT Credit Card Authorization Form

YES! I want to pay my dues on a recurring annual basis. This form authorizes Stewart Howe Alumni Service to deduct payments from my credit card, made payable to Alpha Delta Phi at Cornell, Inc., according to the schedule of donations and methods listed below.

Member's name as it appears on card (please print) _____

Credit card type: Visa MasterCard Card number: _____ Exp. Date _____

Member's billing address: City _____ State _____ ZIP _____

Member's phone number _____ E-mail _____

Bill my dues payment of \$ _____ to my credit card for as long as authorized below.

I would like to add a donation of \$ _____ to my annual dues payment to support the work of Alpha Delta Phi's alumni association.

This authorization is valid until _____.

This authorization is valid until my card's expiration date or until I provide you with written cancellation.

Donor's signature _____ Date _____

N.B. Once you sign up for auto-renewal of dues, your credit card will be charged on January 15 in subsequent years.