Chancellor's Society Enrollment Form

Name:
Address:
City: State: Zip:
Phone:
E-mail:
___ My check is enclosed made payable to Purdue Foundation
___ I wish to use a credit card
___ MasterCard ___ Visa ___ Discover
Name on Credit Card:
Card Number: Expiration Date:
Signature:
___ My employer or my spouse's employer will match this gift
Matching Company Name:
Matching Company Address:
___ Matching form is enclosed ___ Matching form will be sent later
Preferred name(s) to use in the Annual Recognition Report:
___ Please call me to discuss a lifetime income gift or bequest
Please return this gift form to: **PNC Development Office** **1401 S US Hwy 421** **Westville, IN 46391-9542**

Thank You!