



BECOME A SUSTAINING MEMBER!

YES, I want to help! Here's my commitment to a monthly gift:

\$100 \$50 \$25 OTHER _____

CHOOSE ONE:

Checking Account Transfer
(Voided check must be attached)

Credit Card Charge

___ Visa ___ MasterCard ___ AMEX ___ Discover

(Credit Card Number)

(Exp-Month/Year)

(3-Digit Security Code)

Name _____

Address _____

City _____ **State** _____ **Zip** _____

Phone _____ **Email** _____

I hereby authorize Tougaloo College to arrange automatic payments from my account on the _____ day of each month.

Going Green Project: I want to participate, please send only an end-of-the-year statement of my monthly contributions.

I am a graduate (Class of: _____) and my Alumni Chapter affiliation is with: _____.

Signature _____ **Date** _____

Please return form to:
Office of Institutional Advancement
Tougaloo College
500 West County Line Road
Tougaloo, Mississippi 39174

Or by Fax to: (601) 977-4492

For more information, please dial: (601) 977-7871