



## Alumni/Foundation

800 Sixth Street North, Wahpeton, ND 58076

### Payroll Deduction Form

NAME: \_\_\_\_\_ NAID #: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_ CAMPUS PHONE: \_\_\_\_\_

I acknowledge the invitation to support the North Dakota State College of Science Alumni/Foundation through one of the following. Please enroll me in the following:

#### FOUNDATION CLUBS:

- \_\_\_\_\_ NDSCS 300 Club (\$300)
- \_\_\_\_\_ Heritage Club (\$500)
- \_\_\_\_\_ 1903 Founders Club (\$1000)
- \_\_\_\_\_ Visionary Club (\$2500)
- \_\_\_\_\_ Old Main Club (\$5000)
- \_\_\_\_\_ President's Club (\$10,000)

#### ATHLETIC CLUBS:

- \_\_\_\_\_ Wildcat Club (\$200 - \$399)
- \_\_\_\_\_ Bleacher Club (\$400 - \$699)
- \_\_\_\_\_ Top Cat Club (\$700 - \$999)
- \_\_\_\_\_ Director's Club (\$1000)
- \_\_\_\_\_ President's Club (\$1500)
- \_\_\_\_\_ Ambassador's Club (\$3000)

#### OTHER:

- \_\_\_\_\_ Scholarship Endowments (Endowment goal of \$10,000 or more)
- \_\_\_\_\_ Department or Program (Endowment goal of \$10,000 or more)

**\*\* Payments must be completed by June 15<sup>th</sup> Fiscal Year pay check, please calculate accordingly!**  
Please contact the Alumni/Foundation office if you have questions.

I authorize the NDSCS Alumni/Foundation to withdraw the following through payroll deduction

TOTAL GIFT AMOUNT: \_\_\_\_\_ STARTING CHECK DATE \_\_\_\_\_

SEMI-MONTHLY PAYMENT OF: \_\_\_\_\_ TOTAL OF \_\_\_\_\_ PAYMENTS

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

Return the completed form to:

NDSCS Alumni/Foundation Office  
Attn: Barb Uhlich  
Office: 701.671.2247 ~ Fax: (701) 671-2149  
[barbara.uhlich@ndscs.edu](mailto:barbara.uhlich@ndscs.edu)

**\*\*PLEASE NOTE:** for larger donations over a long period of time like: scholarships, endowments or to a specific program contact the Alumni/Foundation office for help on how to complete this form.

(Revised 8.31.11)



**Rekindle The Passion**

[www.ndscsalumni.com](http://www.ndscsalumni.com)