

BUILDING THE REGION'S  
PREMIER SPORT &  
RECREATION CENTRE  
AT TRENT

## Support the Future of Athletics & Recreation at Trent!



SPORT,  
RECREATION  
& WELLNESS  
FOR ALL



Mr.    Mrs.    Ms.    Other \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

### I would like to support the following:

- Athletics & Recreation Facility Renewal and Expansion
- Coaching Excellence Fund
- Athletic Financial Awards
- Outdoor Education & Leadership
- Other – Please specify: \_\_\_\_\_

### Through a:

- One-time gift of \$ \_\_\_\_\_
- Monthly donation of \$ \_\_\_\_\_ for \_\_\_ months or \_\_\_ years  
Starting: \_\_\_/\_\_\_/\_\_\_ (d/m/y)   Ending: \_\_\_/\_\_\_/\_\_\_ (d/m/y)
- Annual donation of \$ \_\_\_\_\_ for \_\_\_\_\_ years  
Starting Date: \_\_\_\_\_



## Payment Options:

- Cheque: Made payable to Trent University
- Credit Card:  MasterCard  Visa  American Express  
Number: \_\_\_\_\_  
Exp Date \_\_\_\_ / \_\_\_\_
- Pre-authorized donation on the 15<sup>th</sup> of each month.  
Please attach a void cheque.
- Gift of Stock: The Advancement Office will follow-up with you

## Questions:

Should you have any questions please feel free to contact Shirlanne Pawley-Boyd,  
Senior Director, Advancement at 705-748-1011 ext. 7955 or shirlannepawl@trentu.ca

## Recognition:

- Yes, I will allow my name to be recognized publicly as a donor
- I wish to give jointly with \_\_\_\_\_
- I prefer that my name not be listed publicly in donor reports or communication materials
- I would like to discuss anonymity or recognition matters with the Advancement Office. Please have a representative contact me. The Advancement Office will follow-up with you.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



To view this document in an accessible format visit [www.trentu.ca](http://www.trentu.ca)

**Thank you for helping make our vision a reality!**