



A Gift to the
Division of Student Affairs
Omicron Delta Kappa Discretionary Fund

Donor Information

Mailing Preference: [] Home [] Business
Name(s)
Organization
Home Address
City State Zip Code
Telephone E-Mail
Business Address
City State Zip Code
Telephone E-Mail

Gift Supporting the Omicron Delta Kappa Discretionary Fund

[] Omicron Delta Kappa Discretionary Fund Amount \$

Payment Options

[] Check Enclosed is my gift check of \$ made payable to University of Maryland College Park Foundation.
[] Credit Card I would like to charge \$ to [] Master Card [] VISA [] Discover [] American Express.
Card Number Expiration Date CVV Code
Authorized Signature Date
[] Payroll Deduction MD State Employees Only I am pledging \$ via a payroll deduction form.
[] Multi-Year Pledge I am pledging \$ and will make annual payments as shown below:
1st payment of \$ due by June 30, 20 or my payment is enclosed.
2nd payment of \$ due by June 30, 20 or the following preferred date
3rd payment of \$ due by June 30, 20 or the following preferred date
4th payment of \$ due by June 30, 20 or the following preferred date
5th payment of \$ due by June 30, 20 or the following preferred date
Authorized Signature Date
[] Gift in Honor/Memory of

Other Information

[] My employer will match my charitable contribution to this fund. Enclosed is the completed and signed matching gift form.
[] Please contact me regarding a gift of stock, real estate, personal property or wire transfer.

I would like to learn more about:

[] Volunteering for and/or donating items to the Maryland Parents Association Silent Auction.
[] Becoming a Corporate Sponsor for Family Weekend
[] Hiring student interns and/or graduates

Please visit www.sagiving.umd.edu/giving/odk for more information or to make a gift online

Return Address

Please return this completed form and your gift to:
Division of Student Affairs Development Office
University of Maryland
James Rychner
8400 Baltimore Avenue, Suite 200
College Park, MD 20740