

BSU BEAVER PRIDE PLEDGE FORM

DONOR INFORMATION

Donor/Business Name
(as you wish to be listed in recognition pieces):

Contact Name: _____

Address: _____

Phone: _____

Email Address: _____

Email Address: _____

PAYMENT OPTIONS

Check payable to BSU Foundation

Payroll Deduction (for on-campus donors)

Credit Card: _____

Card #: _____

Exp. Date: _____

SIGNATURE OF DONOR:

Date: _____

Thank you for your gift!

*Bemidji State University Foundation
1500 Birchmont Drive NE #17
Bemidji, MN 56601-2699
(218) 755-2827
wrrwright@bemidjistate.edu*

BSU BEAVER PRIDE PLEDGE FORM

MEMBERSHIP LEVEL

- Presidents (\$25,000+)
- Vice-Presidents (\$20,000-\$24,990)
- Deans (\$15,000-\$19,999)
- Directors (\$10,000-\$14,999)
- Coaches (\$5,000-\$9,999)
- Varsity (\$3,000-\$4,999)
- Team (\$1,200-\$2,999)
- Captain (\$600-\$1,199)
- Player (\$300-\$599)
- Fan (\$150-\$299)

MEMBERSHIP BENEFITS SELECTED

Please mark which benefits you would like based on your membership level. The amount of your donation that is tax-deductible is based on the difference of your donation and the benefits received.

NSIC D-II and Women's Hockey Season Tickets (\$150+)

Check which tickets you would like:

- _____ Basketball (M)
- _____ Basketball (W)
- _____ Football
- _____ Hockey (W)
- _____ Soccer
- _____ Volleyball

D-I Men's Hockey Season Tickets
(\$600+) Qty: _____

- Football Priority Seating (\$1,200+)
- Priority Parking (\$3,000+)
- I decline all benefits

If you do not select your benefits, we will assume that you are taking all of them