



# Support Huskie Student-Athletes

UNIVERSITY OF SASKATCHEWAN



“Student-athletes benefit from your generous financial support. From equipment and training to travel and academic support, these funds are vital to the ongoing viability of our programs and the ultimate student-athlete experience at the University of Saskatchewan. From all of us, thank you.” Shawn Burt, Chief Athletics Officer

## Donor Information

Name \_\_\_\_\_ Business (if applicable) \_\_\_\_\_

Address \_\_\_\_\_ City/Town \_\_\_\_\_ P/C \_\_\_\_\_

Preferred Method of Contact:  Email  Phone Receipt Options:  Paper  Email

Email \_\_\_\_\_ Cell Phone \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

## Commitment

Team \_\_\_\_\_ CHOOSE YOUR DONATION: \$ \_\_\_\_\_ PER YEAR

Scholarship Support \_\_\_\_\_ \$ \_\_\_\_\_ PER MONTH

Direct Team Support \_\_\_\_\_ I consent to publishing my contribution  Yes  No

I will make a one-time donation in addition to other commitments:  \$100  \$250  \$500  \$1,000  \$ \_\_\_\_\_ Other

## Option 1 Pre-Authorized Debit Please attach a VOID cheque

Start:  1st OR  15th of \_\_\_\_\_ MONTH YEAR

End: \_\_\_\_\_ MONTH YEAR  I wish to make my pledge indefinitely, until cancelled in writing.

Legislation from the Canadian Payments Assoc. requires the University of Saskatchewan to seek express permission from donors to debit their account for the donation outlined herein without providing notification of each transaction. Please review terms & sign/date your agreement to these terms:

- I waive my right to receive pre-notification of commencement of the debits to my account as long as they are in compliance with the information I have indicated above.
- I waive my right to receive pre-notification of changes to the PAD amount to be deducted from my bank account where I have made the request for such change(s) to the Huskie Athletics Office at the address within this brochure, either verbally or in writing.
- I may revoke my authorization at any time, subject to providing 10 business days notice in writing. To obtain a sample cancellation form, or more information on my right to cancel a PAD Agreement, I may contact my financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca).
- I have certain recourse rights if any debit does not comply with this agreement. (Eg/ I have the right to receive reimbursement for any debit not authorized/not consistent with this Agreement. For more information on recourse rights, I may contact my financial institution or [www.cdnpay.ca](http://www.cdnpay.ca).)

Donor Signature \_\_\_\_\_

Date (MM/DD/YYYY) \_\_\_\_\_

## Option 2 Credit Card Payment

Due to recent changes in credit card security requirements, the University of Saskatchewan can no longer accept credit card payment information through the mail. Should you wish to provide a recurring, pre-authorized credit card payment, please check the box below and a member of our team will contact you to make appropriate arrangements.

Yes, please contact me regarding credit card payment.

## Please complete form and return to:

Funding Student Athletes, c/o Huskie Athletics, 87 Campus Drive, Saskatoon, SK S7N 5B2  
University of Saskatchewan Charitable Registration Number: 11927 9313 RR0001



[huskies.usask.ca](http://huskies.usask.ca)