

Monthly Giving Form

Yes, I would like to give a monthly gift to Garrett-Evangelical in the amount of \$_____.

Name_____

Address_____

City, State, Zip_____

Phone_____

I would like to make my monthly gift in the following manner:

(1)_____ **By credit card (or you can set up your own monthly gift at www.garrett.edu/giving)**

Name (as shown on card)_____

____American Express ____Discover ____Visa ____Mastercard

Credit card No. _____ - _____ - _____ - _____ Expires on _____

Date of first withdrawal _____

Signature: _____ Date _____

(2)_____ **By monthly electronic withdrawal* from bank account**

Name of bank_____

Full address of bank_____

Phone number of bank_____

Routing number (aka "ABA Number")_____

Account number_____

Name(s) of account owners_____

Date of first withdrawal_____

Signature: _____ Date _____

Signature (if joint account)_____ Date _____

*(Monthly withdrawals are made around the 3rd of each month.)

Please include a copy of a voided check or deposit slip for the account you wish to use.

My gift is (check one):

_____unrestricted annual fund

_____unrestricted campaign

_____restricted as follows_____

Upon receipt of this form, you will receive confirmation of your plans. In January, gift acknowledgements with yearly giving will be mailed for tax purposes.

If you have questions about this form or need further information, please contact Emily Lutz at 847.866.3927 or emily.lutz@garrett.edu.

Thank you for being our partner in educating spiritual leaders!!