THE BATES COLLEGE MONTHLY GIVING PROGRAM

How does the Monthly Giving Program work?

The Monthly Giving Program deducts a monthly contribution from your credit card or checking account on the 15th of each month. Transfers will appear on your monthly credit card or bank statement. If you use the checking account option, you should deduct each transfer in your account register.

How does the Monthly Giving Program help you?

You can decide what gift you want to make, call us on the toll-free line and be spared the time and effort of sending gifts through the mail.

You may be able to make a larger gift to Bates than you originally thought possible, since you will divide your gift into 12 monthly installments.

You can make the commitment early in the giving year, and know that you’re already counted among Bates’ most valued donors.

How can you participate?

For credit card gifts, call us at 1-888-522-8371, Monday through Friday, 8 a.m. to 4:30 p.m., and we’ll help you sign up. For checking account deductions, complete the attached authorization form and send it along with a voided check. The form allows Bates to process your gift each month for the amount you indicate.

Mail the form to the Advancement Office, Attn: Monthly Giving Program, Bates College, 2 Andrews Road, Lewiston, ME 04240-6028.

Deductions from your account will begin approximately four weeks after we receive your form and will occur on the 15th of every month.

You can change the monthly amount or you can terminate this agreement at any time by notifying the Advancement Office.

Who can answer your question?

Please call the Toll-Free Gift Line, 1-888-522-8371, for answers to questions about the Monthly Giving Program.
Bates College Monthly Giving Program Authorization

Name: ______________________________________  Class: ____________
Spouse Name (if alum): __________________________  Spouse Class: ________
Address: __________________________________________
Telephone: ___________________________________  Email: __________________________________________

☐ Yes, I (We) want this gift split equally 50/50  ☐ No, I want this gift credited only to myself
☐ Other, please split this gift in this way: __________________________________________

☐ Yes, I (We) wish to designate our gift:
☐ Unrestricted – where Bates needs it most!  ☐ Scholarships  ☐ Academic Excellence
☐ Annual Library Purchases  ☐ Residential Life  ☐ Other __________________________________________

Amount of Authorization: $__________/per month  Date Transfer to commence: ____________________
Would you like Bates to continue until otherwise notified: Yes☐  No☐  Date to Discontinue: ____________________

☐ FOR CREDIT CARD (MASTERCARD/VISA/DISCOVER/AMEX) (Please circle type of card)

Credit Card #: __________________________________________  Expiration: (month/year) ___________
Name (as it appears on card): __________________________________________
Billing Address for authorized credit card: __________________________________________

(please print)
(REQUIRED) Authorized Signature of card holder: __________________________

☐ FOR CHECKING ACCOUNTS

For checking account transfers please remember to include a voided check or deposit slip

Bank Name: __________________________________________
Bank Address: __________________________________________
Bank City: _______________________________________  Bank State: ______________  Bank Zip: ___________

It is understood this agreement may be terminated by me (either of us) at any time by written notification to Bates College or the bank. Any such notification to the College shall be effective only with respect to entries initiated by the College after receipt of such notification and a reasonable opportunity to act on it. Any such notification to the bank shall be effective only with respect to entries debited to my (our) account by the bank after receipt of such notification and a reasonable time to act on it.

(IF JOINT BANK ACCOUNT BOTH PARTIES SHOULD SIGN)

Date: ___________________  Signed: ___________________
Date: ___________________  Signed: ___________________

PLEASE RETURN TO: Advancement Office, Attn: Monthly Giving Program, Bates College, 2 Andrews Road, Lewiston, ME 04240

Revised 6/15/07