



RECURRING GIFT AUTHORIZATION FORM

Use this form to set up automatically recurring gifts to the University of Detroit Mercy using your credit card, or debit card. You determine how much, how often, how long, and where you want the money to go. Please print an extra copy of this form for your records.

Gift Information

Designation (list dollar amount of each payment, minimum \$20/payment)

\$ _____ The Fund for UDM

\$ _____ Other (specify)

Start date: _____

How often? Monthly Quarterly Semi-annually Annually

How long? Until I notify you to stop Number of payments: Stop date: _____

Payment Authorization

Credit card or debit card

As specified above, I authorize UDM to charge my:

Visa Mastercard Discover American Express

Card number _____

Exp. date _____ CCV (3-4 digit security code): _____

Name on card _____

Signature _____ Date _____

Matching Gifts

I anticipate that my gifts will be matched by (specify company): _____

Donor Information

Name _____

Street Address _____

City _____

State _____ Zip code _____

Telephone _____

Email _____

Alumna/us Yes No Grad Year: _____

School _____

Spouse Information

Spouse name _____

Email _____

Alumna/us Yes No Grad Year: _____

School _____

Name at graduation _____

Mail form to:

University of Detroit Mercy, University Advancement, 4001 W. McNichols Road, Detroit, MI 48221-3038

Contact us at: (313) 993-1250 • udmgrad@udmercy.edu

Thank you for your commitment.