

ATC Society Gift Form & Authorization Agreement

Thank you! You are joining the ATC Society because you understand the importance of excellent, equitable education in the state of Arkansas. We welcome and greatly appreciate your support in our mission to partner with school districts to recruit, train, license, and support committed Arkansans as empowered teachers! Your contributions make a difference -- no matter the amount.

Name:

Address:

City: **State:** **Zip:**

Phone: **Email:**

- I am enclosing a **check** made payable to "University of Arkansas" for \$
- Please draft a **one-time** amount of: \$15 \$25 \$50 \$100
 \$250 \$500 \$1,000 Other: \$

- Please draft a **monthly** amount of \$ beginning on
- Please continue this draft: for months or until this date:
 until further notice

The University of Arkansas is authorized to withdraw the above amount from my designated bank account. This authorization will remain in effect until I modify or cancel it in writing.

Bank Name:

Routing Number: **Account Type:**

Account Number: Checking
 Savings

Acknowledgements:

- I am making this gift anonymously; please do not recognize me publicly.
- Arkansas Teacher Corps may publicly recognize me or my organization, as a contributing member to ATC Society, without disclosing donation amount(s).

This gift is being made: jointly with my spouse/partner:

on behalf of my organization:

in honor of an ATC Fellow/alumni:

in dedication to a school/community:

An official University of Arkansas gift receipt will be sent to the email you provided once your draft has been fully processed.

Signature: **Date:**

ATC Staff: **Date:**

