



GIVING

DONATION FORM

NAIT Department of Advancement
11762 - 106 Street NW, Edmonton AB T5G 2R1
Charitable Registration # 10778 1205 RR0001

For questions about your gift, please contact 780.471.8499 or giving@nait.ca

DONOR INFORMATION:

Title: Mr Mrs Ms Dr If other, please specify: _____

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Email: _____

Affiliation: Alumni Student Friend Faculty/Staff Other

GIFT AMOUNT: \$ _____

- The NAIT Fund: NAIT's highest priority needs
- Scholarships & Bursaries: NAIT Student Scholarship
- Other: _____

PAYMENT INFORMATION:

- Cheque is enclosed (made payable to NAIT)
- Credit Card (you will be contacted to process your gift)

RECOGNITION:

- I wish to remain anonymous
- I wish to be recognized as: _____

PLEASE SEND ME MORE INFORMATION ON:

- The President's Society
- Including NAIT in my estate plans
 - I have already included NAIT in my estate plans but would like more information

NAIT is committed to protecting the privacy of your personal information. The information you provide will be used to assist in the administration and acknowledgment of your gift, to issue tax receipts, and to communicate with you. We do not release donor names unless requested by the donor.