



THE CHANCELLORS CLUB

STATEMENT OF ACCEPTANCE

I/We prefer to be listed in Chancellors Club publications as:

Name(s) (Spouses may hold joint membership) _____

Preferred Mailing Address _____

City _____ State _____ ZIP _____

Home Telephone _____ Business Telephone _____

E-mail _____

Signature _____ Date _____

Signature _____ Date _____

You may make your contribution to The Chancellors Club using one of the following giving options:

Check. Please make checks payable to KU Endowment.

Online at www.kuendowment.org/chancellorsclub

Credit card. Please complete the following information:

Charge \$ _____ to my    

Card Number _____ Expiration Date _____ Mo. _____ Yr. _____

Signature _____

If you plan to make installment gifts (*available with all three giving options*), please indicate whether:

monthly or quarterly.

Matching gift forms enclosed _____
Please list employer or other organization matching your gift

ANNUAL MEMBERSHIP

LEVELS OF GIVING

THE CHANCELLORS CLUB ASSOCIATES
\$500 annual unrestricted gift
(Donors 35 years old or younger)

THE CHANCELLORS CLUB
\$1,000 annual unrestricted gift

THE CHANCELLORS CLUB PATRONS
\$3,000 annual unrestricted gift

THE CHANCELLORS CLUB BENEFACTORS
\$5,000 annual unrestricted gift

THE CHANCELLORS CLUB AMBASSADORS
\$10,000 annual unrestricted gift

LIFE MEMBERSHIP

\$50,000 or more unrestricted

\$100,000 or more designated for:

To activate membership, please return this Statement of Acceptance with your qualifying gift in the return envelope provided.