



**Advance Access in ASPIRE
PERSONAL DONATION to ASPIRE**

**2015
(September 1, 2015 through August 31, 2016)**

Your support ensures that ASPIRE will continue to advance access and educational opportunity for TRiO students.

I want to **Advance Access in ASPIRE** by making a personal donation of \$ _____ (Total Amount).

PERSONAL DONATION CATEGORIES

- \$ 25 - \$ 49.....ASPIRE Friend
- \$ 50 - \$ 99.....ASPIRE Advocate
- \$100 - \$249..... ASPIRE Council
- \$250 - \$499..... ASPIRE Patron
- \$500 - \$999.....ASPIRE Champion
- \$1,000 and Above.....ASPIRE Benefactor

- Please check payment option: **Check** (Please Make Check Payable to ASPIRE and Submit with this Form)
- Credit Card** (One Time Payment – Please Complete Credit Card Information Below)
- Credit Card** (Automatic Monthly Withdrawals – Please Provide Withdrawal Information and Complete Credit Card Information Below)

I would like my donations to begin the 1st of _____ and end on the 1st of _____.

The number of months will be _____. The amount should be \$ _____ per month.

CREDIT CARD INFORMATION

Credit Card Payment: Visa MasterCard

Account Number: _____ Expiration Date: _____

Credit Card Billing Address: _____
Street Address/Box Number

City _____ State _____ Zip Code _____

Please complete the information below, retain a copy for your records, and mail this form and your Personal Donation to:

Jami Bayles
ASPIRE Development Co-Chair
Director, TRIO Talent Search
USU Eastern - Blanding Campus
639 West 100 South
Blanding, UT 84511

Phone: (435) 678-8163
Fax: (435) 678-8158

Email: jami.bayles@usu.edu

ADDRESS OF CONTRIBUTOR

Name _____

Program _____

Institution _____

Address _____

Signature: _____ Date: _____

TOTAL SUBMITTED \$ _____

Thank you for your personal commitment to ASPIRE and TRIO programs and students.

PLEASE NOTE: _____ Check here if you DO NOT WISH to receive a token of appreciation for your donation.
_____ Check here if you DO WISH to receive a token of appreciation for your donation.