

WFDU Phone Donation Sheet

Date: _____ Show(s)/Host(s) Name: _____

Phone Operator: _____ (Check Box) Pledge Credit Card
Premium Information

Contact Info

Gift Amount: _____ Gift Type (check box): One Time Gift Monthly

End Date (for monthly gifts - Write N/A for "perpetual gifts"): _____

First name _____ Last Name _____

Organization/Business (If Applicable): _____

Matching Gift? (Check Box) Yes No FDU Graduate? (Check Box) Yes No

Mailing Street Address: _____

APT# _____

City/Town: _____ State: _____ Zip Code: _____

Email: _____ Phone # _____

Payment Info

Check box if billing address is the same as mailing address

Billing Street Address: _____ APT# _____

City/Town: _____ State: _____ Zip Code: _____

Card Type (Check box): Visa MC AMEX Discover

Name on Card: _____

Card #: _____

Expiration Date: ____ / ____ Security Code (4 digits for AMEX): _____

Additional Notes/Donation Splits: **NEW SONG RADIO** _____