RE-FOUNDING CAPITAL CAMPAIGN



Pledge Agreement

GIVING LEVELS:	I,, accept the invitation to join others in
CHI PSI VICTORS \$250,000+	support of our Fraternity in its mission of Brotherhood, education, and leadership and do hereby pledge and agree to contribute the total sum of \$ to the Alpha Epsilon of
BADGE CLUB \$100,000	Chi Psi Re-Founding Capital Campaign.
	My gift shall be paid in the following manner (please check one):
\$50,000	☐ One-time Payment ☐ Monthly, in equal payments
	☐ Quarterly (Jan, Apr, July, Oct - all months apply), in equal payments
\$25,000	☐ Semi-Annually (Jan & July -OR- Apr & Oct - select one pair), in equal payments
GOLD CLUB \$10,000	☐ Annually (Jan, Apr, July, Oct - select one month to receive invoice)
	* Pledges may be paid over a period of three or five years. Please describe your payment schedule, i.e., "\$20,000 over three years, with \$10k in year one and then two equal payments
PURPLE CLUB \$5,000	of \$5k in years two and three."
ACTIVE CLUB \$1,000	
SUPPORTERS OTHER AMOUNT	I'd like to receive pledge statements by mail or email at:
	I would like to make my gift to the below funds (check all that apply).
	☐ Board's Discretion for Greatest Need
	Amount of my total pledge to be allocated to this fund
	☐ The Lodge Fund †
	Amount of my total pledge to be allocated to this fund
	☐ The Epsilon Educational Endowment *
	Amount of my total pledge to be allocated to this fund
	† Gifts for the Lodge Fund must be made payable to The Epsilon Trustee Corporation. Gifts are not tax-deductible.
	 Gifts for the Epsilon Educational Endowment must be made payable to The Epsilon Educational Endowment. Gifts are tax-deductible.
	Check one:
	☐ This gift is anonymous
	$\hfill\square$ Please feel free to use my name in donor recognition materials. I would like it to appear as:
	For further information, please contact David Di Rita (313-418-1206 or ddirita@roxburygroup.com).
	Please submit your pledge form via email at connect@alphaepsilonofchipsi.com, or mail it to:
	Alpha Epsilon of Chi Psi Alumni Relations Processing Center P.O. Box 7007 Albert Lea, MN 56007-8007