

Make a Payroll Deduction Gift



Personal Information Your Name: Your Employee ID: Your preferred email address: Your preferred phone number: Recurring gift (deducted per month) of the following amount: \$ What areas are you passionate to support: Specific Program or Award: My Gift is in Memory / in Honour of: Start Date: **Terms of Payroll Deduction Gift** By selecting one of the deduction options above, I understand that this form authorizes Conestoga's payroll department to deduct from my wages the designated amount per pay period as a charitable donation. Recurring Gifts: the deduction will begin on the next pay period and continue until requested to stop. Gift Terms Confirmation*

Have questions?

We'd love to talk with you. Please contact Julie Gillis at 519-748-5220 x3285 or jqillis@conestogac.on.ca

☐ Yes, I have read and agree to the terms of my gift stated above