



**TARLETON**  
**STATE UNIVERSITY**  
Member of The Texas A&M University System

*Yes, I want to be a member of the  
College of Graduate Studies Dean's Circle!*

Name \_\_\_\_\_ Maiden Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_ Email \_\_\_\_\_

Spouse/Partner's Name \_\_\_\_\_ Employer's Name: \_\_\_\_\_

I am an alumnus/alumna:

Degree \_\_\_\_\_ Major \_\_\_\_\_ Graduation Year \_\_\_\_\_

**GIFT AMOUNT:** *Please note that employer matching gifts can count toward these levels.*

\$1,000 Philanthropist    \$500 Benefactor    \$250 Patron

**PAYMENT SCHEDULE:**

One-Time Payment    Monthly    Quarterly  
 Please continue my gift payment indefinitely    Please end my gift payment on \_\_\_\_\_

**PAYMENT INFORMATION:**

Please make your check payable to Tarleton State University, or complete the information below for a credit card payment.

Visa    MasterCard    Discover

Card Holder's Name \_\_\_\_\_

Card # \_\_\_\_\_

Expiration \_\_\_\_\_ CVV Code \_\_\_\_\_ Billing Zip \_\_\_\_\_

Please charge the credit card above for all payments toward this pledge.

Signature \_\_\_\_\_

**MATCHING GIFT:**

My employer/spouse's employer will match this gift. I will contact my employer to initiate the match.

**MISCELLANEOUS:**

I am interested in joining the Alumni Association.    I have provided for Tarleton in my will.  
 I am interested in how I can be more involved with Tarleton.    I am interested in leaving a gift to Tarleton in my will.

*Please mail to: Tarleton State University, Advancement Services, Box T0260, Stephenville, TX 76402  
[www.tarleton.edu/giving](http://www.tarleton.edu/giving) ♦ [giving@tarleton.edu](mailto:giving@tarleton.edu) ♦ phone 254.968.1756*