



Bulldog Club Donation Form

Mr. Mrs. Ms. _____ Birth Date _____

Spouse _____ Birth Date _____

Address _____

City _____ State _____ Zip _____

Company _____ Position _____

Telephone: Home _____ Cell _____

Opt out of GWU text messages

Email _____

Referred by _____

Relation to GWU:

Alumnus Year _____

Former GWU Sport(s), Year(s) _____

Friend of GWU

Parent of GWU Student _____ Student's Name

Parent of Student Athlete _____ Sport(s)

Please indicate your desired membership level: _____

Amount give/pledged: \$ _____

Enclosed is a check (make payable to GWU Bulldog Club)

Monthly Bank Draft (attach voided check & return with this form)

Bank Name _____

Address _____

City, State, Zip _____

Account Type: Checking Savings

Account # _____

Routing & Transaction # (9 digits) _____

Monthly Amount to Deduct _____

Select Date of Withdrawal: 5th or 25th

Signature _____