Slippery Rock University

CAMPUS FAMILYCAMPAIGN

Contact Information

DEPARTMENT	
CAMPUS ADDRESS	
EMAIL	
Areas of Impact	
□ Slippery Rock University's most immediate priorities □ Department, scholarship or program (select up to three)	
	\$
	_ \$
	_ \$
Payment Information	
I will support SRU this year with a donation of:	\$
NAME AS IT APPEARS ON CARD	
CARD NUMBER	

- Enroll me in payroll deduction. Distribute my donation evenly over the remaining pay periods in the academic year
- I My check made payable to SRU Foundation, Inc. is enclosed
- ☐ Please charge my credit card

