

Section 1, Personal Information

First Name M.I. Last Name

Mailing Address

City State Zip Code

Phone Number Email Address

Section 2, Donation Options

I wish to enroll in the Monthly/Quarterly/Semi-Annually Bank Draft Program as offered by the Eta Xi House Corporation

Giving Frequency

- Monthly
- Quarterly
- Semi-Annually

Date of Account to be Drafted

- 1st
- 10th
- 15th

\$ Amount to be Drafted

Start/End Date

- I wish for my donation to begin on _____
- I wish for my donation to end on _____
- I wish for my donation to be a Recurring Donation where I must give written consent to end my donation*

Check here if you wish for your donation amount to remain anonymous.

Brother, on behalf of the House Corporation, we cannot thank you enough, every donation makes us that much closer to making the new Eta Xi Chapter House a reality