

EMPLOYEE PAYROLL CONTRIBUTION AUTHORIZATION FORM

Email to	payrol	l@roya	lroads.ca
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PART 1 – EMPLOYEE INF	ORMATION					
Name			Employee Number			
Email						
Address			37.			
City	Prov	Postal C	Code			
Home Ph		Work Ph	1 200000			
PART 2 – YOUR DONATIO	ON					
	upport what happens here a y welcome. For more inform		s and areas most in need of your support ds.ca/giving	are noted below but donations		
Area of Greatest Student N	Need (107) Support student s	success with financial awards,	research grants and other resources.	N		
A Vision in Bloom (654)	Enhance our gard	Enhance our gardens, heritage and our impact in the community.				
Give to a specific fund	For a list of funds	For a list of funds you can to contribute to visit royalroads.ca/giving/give-fund-or-award.				
I would like to support this fun	nd:		7,0000 10000 7,0000 10000 7,00000 10000			
PART 3 – PAYMENT OPTIONS			PART 4 – DONOR RECOGNITION			
By my signature below or by my email submission, I authorize:			I prefer that my gift remain anonymous			
One time contribution of	\$		PART 5 – EMPLOYEE AUTHORIZATION			
Bi-weekly payroll deductions in the amount of (min \$5) \$			Employee signature			
Start date	End date	Continuous	Date	1.0000000		
PAYROLL (OFFICE USE ONL)	 Y)					
Fund name and number assign	<u></u>		18 .81 .81	**************************************		
Foundation consultation with						
Form received by		Date				
our donations will be incl	uded in your annual T4 sta	tements.	ou do so much for our students ever	y single day. Thank you.		

Please note that all personal information is collected and used in accordance with the BC Personal Information Protection Act (PIPA). For more information see oipc.bc.ca.

Questions?

- · Want to know more about a fund?
- Thinking about making a legacy gift through your will?

Please get in touch with the Advancement Office at 1.866.207.0080 or advancement@royalroads.ca