



Texas A&M University-Corpus Christi

Parents' Council

Membership Form

The Parents' Council needs your continued support to sponsor student related programs and University enhancements. Please complete this form and support with a gift amount that makes you proud!

(Please print legibly. Keeping our records accurate and current means keeping YOU more informed.)

Mother's name _____
Address _____
City, State, Zip _____
Cell Phone (_____) _____
Email _____
Employer _____
Position _____
Employer Address _____
City, State, Zip _____
Business Phone(_____) _____
Former A&M-CC student? ___Yes ___No

Father's Name _____
Address _____
City, State, Zip _____
Cell Phone(_____) _____
Email _____
Employer _____
Position _____
Employer Address _____
City, State, Zip _____
Business Phone(_____) _____
Former A&M-CC student? ___Yes ___No

Student's Name _____ Date of Birth _____ A# _____ Major: _____
Student's Name _____ Date of Birth _____ A# _____ Major: _____

Parents' Council Membership Levels

Yes! I want to join the Parents' Council and support student related programs and University enhancements. Please write in amount of your tax deductible annual donation.

- \$ _____ Island club \$50-\$99
\$ _____ Century Club \$100-\$249
\$ _____ Deans' Society \$250-\$499
\$ _____ Provost's Society \$500-\$999
\$ _____ President's Society \$1,000+
\$ _____ Other

Select payment option

- Check (payable to A&M Corpus Christi)
Credit Card (Please visit the website below)

http://onlinegift.tamucc.edu/

- Islander Draft (Monthly Bank Draft)

I (we) hereby authorize Texas A&M University-Corpus Christi, hereinafter called COMPANY, to initiate debt entries of \$ _____ (enter amount to be withdrawn each month) to my (our) checking account and the depository names below, hereinafter called DEPOSITORY, to debit the same to such account on the 1st or 15th of each month (check one) to be charged in 12 equal monthly installments. This authority is to remain in full force and effect until COMPANY and DEPOSITORY have received written notification from me (or either of us) of its termination in such time and such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Signature _____ Date _____

Please attach voided check for Islander Draft

Matching Dollars

If you work for a company that provides matching gifts to institutions of higher education, you could double or triple your gift by just sending in your matching gift form along with this form. All you do is ask your personnel office for a matching gift form, fill out your portion of the form and send it to us. We'll do the rest and you'll get the credit! Corp: _____

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