



# BLUE OVAL CLUB

Name \_\_\_\_\_

Spouse/Partner Name \_\_\_\_\_

Birthday (MM/DD/YY) \_\_\_\_\_

Spouse/Partner Birthday (MM/DD/YY) \_\_\_\_\_

Preferred Mailing Address

Street \_\_\_\_\_

City/State/ZIP \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Alumnus/Alumna? Y / N

College(s)/School(s) \_\_\_\_\_ Graduation Year \_\_\_\_\_

Spouse/Partner Alumnus/Alumna? Y / N

College(s)/School(s) \_\_\_\_\_ Graduation Year \_\_\_\_\_

Letter Winner? Y / N Sport \_\_\_\_\_ Years Played \_\_\_\_\_

Spouse/Partner Letter Winner? Y / N

Sport \_\_\_\_\_ Years Played \_\_\_\_\_

Amount of Gift \$ \_\_\_\_\_

Payment Method  Visa  MC  Discover

Credit Card No. \_\_\_\_\_

Exp. Date \_\_\_\_\_

Name on Card: \_\_\_\_\_

Full Amount  Charge \_\_\_\_\_ (dollar amount)

per month for \_\_\_\_\_ months.

Check Enclosed (payable to Drake University)

Matching Gift (Please enclose your company's matching gift form.)

Waive my Benefits.

*(Checking this box will exclude you from receiving a priority seating or reserved parking option or a ticket order form for men's and women's basketball, thereby making your gift 100 percent deductible rather than 80 percent deductible.)*

**Please mail to:**

Drake University Athletics, P.O. Box 1848, Des Moines, IA 50305-1848

**THANK YOU FOR YOUR SUPPORT OF DRAKE ATHLETICS!**



**DRAKE UNIVERSITY  
BLUE OVAL CLUB**

**Drake Athletics** 2507 University Ave., Des Moines, IA 50311

**BULLDOG CLUB** 515-271-2228 **TICKET OFFICE** 515-271-3647

[www.godrakebulldogs.com](http://www.godrakebulldogs.com)