

# The South Club at Joe Aillet Stadium: Pledge Commitment Form

Date: \_\_/\_\_/\_\_

Donor Name(s): 1) \_\_\_\_\_ 2) \_\_\_\_\_

In support of Louisiana Tech Athletics and in consideration of the gifts of others, I/we commit to contributing to LTAC and the Quest for Excellence campaign through the following premium seating opportunity:

**Club Seats**       Total Construction Gift **\$1,000/seat**      Annual LTAC Gift **\$1,700/seat**      +      Tickets, Food & Parking **\$300/seat**      =      Annual Payment **\$2,000/seat**

# of Seats	Construction Gift per seat	Total Construction Gift Commitment	# of Seats	Annual per seat	Annual Payment*
_____	x \$1,000 =	\$_____		_____ x \$2,000 =	\$_____

\*Annual payment due upon utilization of facility (fall, 2015)

My Total Construction Gift commitment will be fulfilled through the following payment schedule; plus the Annual Payment resulting with the Total Yearly Payment.

Year	Month	Construction Gift Payment	Annual Payment	Total Yearly Payment
2014	_____	\$_____	+ \$_____ =	\$_____
2015	_____	\$_____	+ \$_____ =	\$_____
2016	_____	\$_____	+ \$_____ =	\$_____
2017	_____	\$_____	+ \$_____ =	\$_____
2018+	_____	\$_____	= \$_____ =	\$_____

Total Construction Gift Commitment: \$\_\_\_\_\_

+ And beyond through commitment term (see reverse side)



### *Pledge Commitment Form (Continued)*

All Construction Gift funding payments made by December 31, 2014 will count towards Priority rankings for initial allocations.

I/We understand that the Total Annual Payment will be required on an annual basis throughout the entire term to secure the associated premium seating opportunity.

I/We commit to secure the chosen premium seating opportunity for the following choice of term, understanding the Total Annual Payment will not increase during this term and will begin with the initial year of occupation (projected Fall, 2015):

\_\_\_ 3 years      \_\_\_ 5 years      \_\_\_ 7 years

It is understood that this is a letter of commitment to enter a mutually agreed upon premium seating contract at a later date.

Amount Enclosed \$ \_\_\_\_\_ (Please make checks payable to Louisiana Tech Athletics)

Donor Signature(s)

_____	_____	_____
(Print)	(Sign)	(Date)
_____	_____	_____
(Print)	(Sign)	(Date)

Athletic Department Representative

_____
(Sign)
_____
(Date)

**Special Notes or Payment Instructions:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Processing Notes:**

Fax pledge form to: 318.251.8324

***Donor contact information (updates or changes only):***

Name: _____	Name: _____
Business: _____	Business: _____
Address: _____	Address: _____
E-mail: _____	E-mail: _____
Daytime phone: _____	Daytime phone: _____
Fax: _____	Fax: _____

