

2016-17 Payroll Deduction Authorization

Chanticleer Athletic Foundation (CAF)

2016 Football Season Tickets

Name _____ CCU ID Number _____

I receive 18 24 Bi-weekly paychecks Semi-monthly paychecks

ORDER INFORMATION

Football Season Tickets

2016 Football Amount \$_____.00 (payment must be completed by 12/31/16).

Chanticleer Athletic Foundation Donation (one donation is valid for 2016-17 athletic season)

CAF Donation Amount \$_____.00 (payment must be completed by 6/30/2017).

Is this CAF donation in connection with the purchase of football, basketball or baseball tickets?

Yes No If yes, please check appropriate donation level below:

<input type="checkbox"/> Suite Level III	\$8,000	Parking for all three sports included.
<input type="checkbox"/> Suite Level II	\$6,500	Please choose two sports: <input type="checkbox"/> Football <input type="checkbox"/> Basketball <input type="checkbox"/> Baseball
<input type="checkbox"/> Suite Level I	\$4,500	Please choose one sport: <input type="checkbox"/> Football <input type="checkbox"/> Basketball <input type="checkbox"/> Baseball
<input type="checkbox"/> Chant III	\$2,000	Parking for all three sports included.
<input type="checkbox"/> Chant II	\$1,600	Please indicate parking (choose two): <input type="checkbox"/> Football <input type="checkbox"/> Basketball <input type="checkbox"/> Baseball
<input type="checkbox"/> Chant I	\$1,200	Please indicate parking (choose one): <input type="checkbox"/> Football <input type="checkbox"/> Basketball <input type="checkbox"/> Baseball
<input type="checkbox"/> Champion	\$500	Parking for football and basketball included.
<input type="checkbox"/> Captain	\$250	Please indicate parking (choose one): <input type="checkbox"/> Football <input type="checkbox"/> Basketball
<input type="checkbox"/> Coach	\$100	Parking for football included.
<input type="checkbox"/> Team CAF	\$19.54	

Chanticleer Athletic Foundation (CAF) donations must be paid in full by June 30, 2017.

A new Payroll Deduction Authorization must be submitted each year prior to July 1 in order to continue your donation.

I authorize the Payroll Office to deduct these monies from my payroll checks for football season tickets and/or a donation to the Chanticleer Athletic Foundation. If I leave employment with the University, I authorize the Payroll Office to deduct any outstanding balance from my last payroll check.

Signature: _____ Date: _____

Return forms to the CAF or Athletics Ticket Office in Arcadia Hall

Chanticleer Athletic Foundation representative _____ Date _____

Athletics Ticket Office representative _____ Date _____

Financial Services representative _____ Date _____