



Enrollment Form

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To enroll in the scheduled payment plan please complete this two page form, including the debit or credit card number, expiration date, and your signature.

IPTAY 2021 Monthly Draft, (July 2020 through June 2021)

Please check the box for the level at which you would like to contribute for the IPTAY 2021 year as well as check the box for the frequency of drafts to complete your pledge. If you donate at an amount not listed below, please enter that amount in the blank provided at the bottom of the chart.

Level	<input type="checkbox"/> Monthly (12)	<input type="checkbox"/> Quarterly (4)	<input type="checkbox"/> Semi - Annually (2)
Paw - \$60 <input type="checkbox"/>	\$5.00	\$15.00	\$30.00
Purple - \$180 <input type="checkbox"/>	\$15.00	\$45.00	\$90.00
Orange - \$450 <input type="checkbox"/>	\$37.50	\$112.50	\$225.00
Champion - \$900 <input type="checkbox"/>	\$75.00	\$225.00	\$450.00
Tiger - \$1,700 <input type="checkbox"/>	\$141.67	\$425.00	\$850.00
Howard - \$2,600 <input type="checkbox"/>	\$216.67	\$650.00	\$1,300.00
IPTAY - \$3,500 <input type="checkbox"/>	\$291.67	\$875.00	\$1,750.00
Jervey - \$5,000 <input type="checkbox"/>	\$416.67	\$1,250.00	\$2,500.00
McFadden - \$6,500 <input type="checkbox"/>	\$541.67	\$1,625.00	\$3,250.00
Fike - \$8,000 <input type="checkbox"/>	\$666.67	\$2,000.00	\$4,000.00
Heisman - \$12,000 <input type="checkbox"/>	\$1,000.00	\$3,000.00	\$6,000.00
Riggs - \$25,000 <input type="checkbox"/>	\$2,083.34	\$6,250.00	\$12,500.00
Other - \$			

IPTAY NUMBER: _____ NAME: _____
(if renewing)

ADDRESS: _____

CITY, STATE, ZIP: _____

DAYTIME PHONE NUMBER: _____

I/We, _____, hereby authorize IPTAY to DEBIT monthly my contribution as indicated below. I/We understand this authorization is to remain in full force and effect until IPTAY has received written notification of its termination in such time and manner as to afford IPTAY reasonable opportunity to act on it. Any debits initiated in error are refundable. Upon agreement between IPTAY and Donor, the debit of donor's account is non-negotiable and non-transferable. Further, we reserve the right to cancel this service if your banking institution declines a draft for any reason.

*After 2 (two) payments are declined, you will be removed from the draft. Please keep your information up to date.



Enrollment Form

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 VISA MASTERCARD DISCOVER AMERICAN EXPRESS

CARD NUMBER: _____ EXP DATE: ____/____(MONTH/YEAR)

NAME ON CARD: _____ DAYTIME PHONE: _____

SIGNATURE REQUIRED: _____

Draft Date The monthly draft for IPTAY 2021 will begin on July 1, 2020. If you prefer the draft to occur on a different date, please indicate that date here: _____. However, the final draft will be set for no later than June 1, 2021, the IPTAY deadline.

Faculty/Staff If you are employed by, or retired, from Clemson University please provide the department name and/or retirement date. _____

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