

BRYN ATHYN COLLEGE®
OF THE
NEW CHURCH

“All in” Giving Form (2025-26)
Employee Voluntary Payroll Deduction Authorization

Employee Information:

Name: _____

Work Email: _____ Work Phone: _____

Gift Designation:

- BACNC Annual Fund \$ _____ BACNC Student Scholarship Fund \$ _____
- Theological School Dean’s Fund \$ _____ Swedenborg Library Fund \$ _____
- 150th Ethical Foundations / Curricular Development Fund \$ _____
- Other Fund: _____ \$ _____

Other Academy and/or General Church Gift Designations:

- Fund for ANCSS \$ _____ ANCSS Student Scholarship Fund \$ _____
- GC Society Annual Fund \$ _____ (Society Name: _____)
- Fund for the General Church \$ _____

This deduction should begin with the:

1st or 2nd pay period in _____.

Month

Please allow the deduction to continue until:

- a total amount of \$ _____ is reached.
- the end date of _____ is reached.
- I contact you to modify my payroll deduction.

12 month / 24 pay period examples	
Pay Period Amt.	Total Annual Gift
\$104.17	\$2,500
\$41.67	\$1,000
\$20.84	\$500
\$10.42	\$250

Employee Authorization:

Signature Date

Thank you for supporting Bryn Athyn College of the New Church!

ANC-GC Human Resources
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