

# 2026 ANNUAL FUND

## YOUR IMPACT

- Annual Fund donations, along with the endowment distribution, fund athletics scholarships.
- These gifts expand access to a world-class UVA education, strengthens recruiting and retention, and ensures scholarship opportunities across all sports.

Account Number \_\_\_\_\_  
 Account Name \_\_\_\_\_  
 Address Line 1 \_\_\_\_\_  
 Address Line 2 \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Business Phone \_\_\_\_\_  
 Cell Phone \_\_\_\_\_

Additional Information

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## MY 2026 GIFT:

Your 2025 Annual Fund commitment was \_\_\_\_\_  
 Your 2026 Annual Fund commitment to date is \_\_\_\_\_  
 My 2026 Annual Fund commitment will be:  
 110% \_\_\_\_\_  Next Level \_\_\_\_\_  
 Renewal \_\_\_\_\_  Other \_\_\_\_\_

## TOTAL 2026 COMMITMENT:

\$ \_\_\_\_\_

My total 2026 gift for current use scholarships should be designated as follows:

\$ _____ Unrestricted	\$ _____ Football
\$ _____ Baseball	\$ _____ Women's Soccer
\$ _____ Men's Basketball	\$ _____ Men's Soccer
\$ _____ Women's Basketball	\$ _____ Softball
\$ _____ Women's XC/TF	\$ _____ Rowing
\$ _____ Men's XC/TF	\$ _____ Women's Swimming
\$ _____ Field Hockey	\$ _____ Men's Swimming
\$ _____ Women's Golf	\$ _____ Men's Tennis
\$ _____ Men's Golf	\$ _____ Women's Tennis
\$ _____ Women's Lacrosse	\$ _____ Volleyball
\$ _____ Men's Lacrosse	\$ _____ Wrestling

Friends Of programs to be allocated for the scholarship needs of the sport(s) shown above.

*Men's and Women's squash scholarships are permanently endowed through donor philanthropy.*

### I'm interested in learning more about:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> Sport Enhancement Funds | <input type="checkbox"/> Planned Giving     | <input type="checkbox"/> Scholarship Endowments | <input type="checkbox"/> Unrestricted Giving |
| <input type="checkbox"/> Facilities              | <input type="checkbox"/> JPJ Brick Campaign | <input type="checkbox"/> Operational Endowments | <input type="checkbox"/> Sabre Society       |

For more information, go to  
[VirginiaAthleticsFoundation.com](http://VirginiaAthleticsFoundation.com)

## PAYMENT INFORMATION

Enclosed check amount \$ \_\_\_\_\_ payable to Virginia Athletics Foundation  
 Amount to be charged on my credit card NOW \$ \_\_\_\_\_ American Express, Discover, Visa, Mastercard  
 Name on card \_\_\_\_\_ Card # \_\_\_\_\_ Exp. date \_\_\_\_\_  
 Store my credit card information  Use my credit card information one time only Notes: \_\_\_\_\_  
 I would like to increase the impact of my gift by covering my credit card processing fee. Please increase my gift by  \$5  \$25  Other \_\_\_\_\_  
 Received Donor Email Address \_\_\_\_\_ Received Donor Account Number \_\_\_\_\_ [CODE 26]