



## Refer a Coog Program

Referred By: \_\_\_\_\_ Referrer Account Number: \_\_\_\_\_

Your Name: \_\_\_\_\_ Your Phone: \_\_\_\_\_

Your Email: \_\_\_\_\_ Your Address: \_\_\_\_\_

## Referral Benefits

**Five (5) Priority Points for the Referrer (If the referral donates to the Cougar Fund)**

**The new Cougar Pride Member receives five (5) Priority Points plus One (1) for every \$100 Donated to Cougar Pride**

## Payment Options

**Payment may be paid in full or on a monthly basis (Monthly commitments must be paid in full by June 30, 2018)**

Full  Monthly   
*(Processed on the 8<sup>th</sup> of each month)*

Name (exactly as on your credit/debit card): \_\_\_\_\_

VISA  MasterCard  Discover  American Express

Credit Card #: \_\_\_\_\_ Exp: \_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

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

On Behalf of Cougar Pride and student-athletes, thank you!  
Cougar Pride | University of Houston | 3700 Cullen Blvd., Ste. 111 | Houston, TX 77204  
713-743-GoUH (4684)