



DONOR CONTRIBUTION FORM

YES! I will invest in academic excellence in Warsaw Community Schools with my contribution to the **Warsaw Education Foundation**.

___ I will commit to a **five-year annual pledge** of
___ \$2,500 ___ \$1,000 ___ \$500 ___ \$250 ___ \$100 ___ Other

___ A **one-time contribution** of
___ \$2,500 ___ \$1,000 ___ \$500 ___ \$250 ___ \$100 ___ Other

List your name as you would like it to appear in any acknowledgement

DONOR NAME (PRINT) _____

ADDRESS _____
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My Gift is in Memory of In Honor of _____
Name(s)

In addition to publishing my memorial or tribute gift, send an acknowledgement of my gift to:

NAME(S) _____

ADDRESS _____
Street City State Zip

If you would like to make a gift other than cash (stock, property, life insurance, etc.) please contact the Warsaw Education Foundation at 574-371-5098 X2410 to discuss your gift idea. We will work with you and your financial advisor on the details.

PLEASE MAIL FORM TO: **Warsaw Education Foundation**
P.O. Box 1343
Warsaw, IN 46581

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