

# 2008 / 2009 SCHOOL YEAR • WCEF DONATION FORM

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_  This is a new address  We are new to the school district

**Donation:**

\$100     \$365 (a dollar a day!)     **\$500 (suggested)**     \$1000     \$2000     \$5000     Other \_\_\_\_\_

**Payment Options:**

Full payment enclosed                       4 payments – 25% Now, 25% in Oct, 25% in Nov, 25% in Dec  
 2 payments – 50% Now and 50% in Oct     Payroll deduction plan. Company name: \_\_\_\_\_

Signature: \_\_\_\_\_

We are pleased to offer payment options and additional opportunities to augment your giving. However, because our budget and funding responsibilities are based on your commitments, it is necessary for us to inform you that your signature on this form implies that you will assume personal responsibility for all outstanding installments and payments due as indicated.

Enclosed is my check in the amount of \$ \_\_\_\_\_  
 Please charge my  VISA     MasterCard in the amount of \$ \_\_\_\_\_  
Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Signature \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

**Corporate Matching**

This is when an employer matches all or a part an employee's donation. The process must be initiated through your Human Resource or Payroll department. Not sure if your company matches? Go to our website [WCEFK12.org](http://WCEFK12.org) and under "Ways to Give," click on "Matching Gift Corporations" for company matching information.

My employer will match my donation. Company Name: \_\_\_\_\_ Amount \$ \_\_\_\_\_

**Benefit Level Options**

Benefit level is based on **total donation** (Parent donation plus any corporate matching donation).  
For benefit level details, visit [WCEFK12.org](http://WCEFK12.org).

White Level (\$500)                       Maroon Level (\$1000)                       Gold Level (\$2,000)                       Knight Level (\$5,000)

I will have a student at Las Lomas during the 2008/2009 school year. Please indicate PTSA membership names:

**PTSA membership applies to Las Lomas parents, students, teachers or staff only.**  
*White level = 1 membership, Maroon level = 2 memberships, Gold/Knight = 4+ memberships*

**Family Information:**

Student Name	Grade in 08/09	School
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please direct my donation as follows:  All Programs     K-8     9-12  
 Please do not use my name in public acknowledgements.  
 Contact me about volunteering with WCEF.