

DONATION Form

| Date: _ | |
|----------|--|
| The | family will donate: |
| | \$1,200 X students = \$ |
| | \$ X students = \$ |
| Contrib | ution to be made by: |
| | Enclosed check. |
| | Credit card. (Contact WISH Finance Manager jennie@wishcharter.org to arrange payment.) |
| | Pledge to donate \$ monthly, or a single \$ payment by (date). |
| On Mo | We have made/will make a donation via PayPal. To donate via PayPal, go to the WISH website: www.supportWISH.org. You can donate a single amount, or make monthly donations adding up to the amount you pledge.) The time amount via PayPal: or potentially amount via PayPal: |
| Student | t Name(s) and Class |
| • | ation to be used for tracking of % participation by class only). uld like to acknowledge you for your donation. Please select one of the following: |
| | |
| | Please list: (name or company name) on the WISH Donor Wall on the WISH web site. |
| | Please keep my donation anonymous. |

WISH Charter is a 501(c)(3) non-profit corporation. Tax receipts will be issued for all donations (Tax ID#36-4632876). Please return checks to the main office or mail checks to: