

THE BROOKLYN BROWNSTONE SCHOOL PTA GIVING TUESDAY 2023 DONATION FORM

Name of Person Making Donation	Donation				Today's Date				
Child/Children Grades: PK K 1st	2nd	3rd	4th	_ 5th	(che	ck all tha	at apply)		
Address									
City,State, Zip Code									
		Email Address* purposes will be emailed to the above email address.							
	donation	amount	MOUN is apprecia e amount	ated.	to meet	our anni	ual goals.		
■ \$900 x # of children 	=\$		Other Amount =						
\$500 x # of children = \$ \$250 x # of children			_						
	MATO	CH FUN	NDING						
☐ YES, my company,initiate the process.		, parti	articipates in a matching program and I will						
☐ I am unsure if my company,			_, particip	ates in n	natching	, please	contact me.		
	PA	YME	NT						
 ☐ I have made my donation through ☐ Please find check enclosed payable ☐ Please charge my credit card, a one ☐ Please charge my credit card in equand only the November payment is 	e to The B e time cha ual increm	Brooklyn rge. nents, I u	Brownston	the last p	•	will be	in June 2024		
Name of Card Holder (please print)									
CC#			Expiration	1	_Visa	_ MC	Amex		
Security Code		Billing	Billing Zip Code						
Card Holder Signature									

For Questions, Please Email <u>TBBSPTAFundraising@gmail.com</u>