



Skaneateles Education FOUNDATION

The Skaneateles Education Foundation and the children we serve are grateful for your donation.

Please indicate name(s) as you would like them to appear in Annual Report.

NAME(S) _____

I/we wish to remain anonymous.

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE _____ E-MAIL _____

ALUMNUS/A OF SCSD CLASS OF _____ MAIDEN NAME _____

GIVING LEVELS

- FRIEND** \$0 – \$99
- HONOR ROLL** \$100 – \$249
- SCHOLAR** \$250 – \$499
- VALEDICTORIAN** \$500 – \$999
- ADVOCATE** \$1,000 – \$4,999
- PARTNER** \$5,000 – \$9,999
- LEADER** \$10,000 – above



I/we are pleased to enclose my/our gift of \$ _____ in support of the Foundation.

I/we wish to name my/our gift in memory of _____ in honor of _____.

I/we would like additional information regarding:

- A gift to the Endowment Fund; A gift of appreciated securities; Planned giving
- My company, _____, will match my gift.

Please make checks payable to the **Skaneateles Education Foundation**.

Mail this form with your check to:

Skaneateles Education Foundation
PO Box 16, Skaneateles, NY 13152

The Skaneateles Education Foundation is a 501(c)(3) not-for-profit charitable organization. Your contribution is tax deductible in accordance with the regulations of the Internal Revenue Service.

**Thank you
for your support!**