

Springdale Public Schools Education Foundation

Every Child Deserves A Strong Foundation

I want to invest in the future of the Springdale Public Schools by making my contribution to the Springdale Public Schools Education Foundation Annual Campaign.

Jame:	
ast 4 Digits of your Social Security:	Email:
address:	
City:	Zip:
he Springdale Public Schools Education Foundatio he Springdale Public Schools by procuring and pro	uilding Where You Work on was created to enhance the quality of education i widing the necessary funds for worthwhile program oringdale Public School District.
PAYROLL DEDUCTION	ONE-TIME GIFT
☐ I authorize Springdale Public Schools to	☐ I have attached a one-time cash or
deduct a monthly contribution of \$	check donation \$
Your contribution will automatically be deducted from each paycheck. To make changes to your contribution amount please contact the Springdale	☐ Visionary - \$6,000+ ☐ Benefactor - \$2,000+ ☐ Patron - \$600+ ☐ Friend - \$200+ ☐ Member - \$25+ Please make checks payable to the Springdale Public

Please return this form via Campus Mail to Springdale Public Schools Education Foundation at the Support Services Administration Annex

Or Mail this form

to: