



THE FOUNDERS ACADEMY

The Founders Academy Public Charter School 2019-20 Annual Fund Pledge Form

[Updated: November 19, 2019]

Contact Name _____

Address _____

City _____ State _____ Zip _____

Phone (____) _____ Email address _____

Name to use in recognition of donation _____

I would prefer my name/gift to be kept confidential Yes / No

The Founders Academy President's Club

Donation Amount: \$ _____

Payment to be made: *(Circle one)*

One-time donation Monthly installment Through Paypal Pledge \$ _____

FOUNDERS' FRIENDS (\$25 - \$499) _____

LINCOLN LEVEL (\$500 - \$999) _____

ROOSEVELT LEVEL (\$1,000 - \$2,999) _____

JEFFERSON LEVEL (\$3,000 - \$4,999) _____

WASHINGTON LEVEL (\$5,000 +) _____

Method of Payment:

- Check enclosed. Please make checks payable to: "The Founders Academy"
- Please bill my credit card: Card Type (circle one) Visa/MasterCard/ American Express
Account Number: _____ Exp. Date: _____
Signature: _____ Security Code: _____

Does your employer match donations? Yes/No Employer Name: