

◆◆◆◆◆ SUGGESTED DONOR LEVELS (*Contributions in any amount are greatly appreciated*) ◆◆◆◆◆

Partner: Up to \$1,999

Merit Scholar: \$4,000 - \$7,999

Valedictorian: Over \$12,000

Honor Roll: \$2,000 - \$3,999

Dean's List: \$8,000 - \$11,999

Name(s): _____ Phone: _____

Address: _____

Please select one payment option: (Make checks payable to: Woodside School Foundation)

I enclose a check in the amount of \$ _____.

I pledge to pay \$ _____ by February 15th

Please charge \$ _____ to my: Visa MasterCard

Card #: _____ Exp. Date: _____

Signature: _____

Billing Address (*if other than above*): _____

Yes! I want to help Woodside School!

My donation will be matched by: _____

Please enclose matching grant form from your employer or fax to 650-851-3239

Please contact me at: _____ about a gift of: Stock Bequest

Please contact me at: _____ about a donation to the Endowment Fund.

Please list my donation as follows: I prefer my donation to be anonymous.

In honor of: _____

In memory of: _____

All donations are tax deductible and greatly appreciated.