



The Education Foundation Joint School District No. 2

P.O. Box 563
Meridian, ID 83680
Phone: 208-350-5039
www.meridianschoolsfoundation.org

Yes, I want to make a difference in Joint School District No. 2.

\$25 \$50 \$100 \$250 \$500 \$1000 Other \$ _____

I would like my/our contribution to be **undesignated** to fund Classroom Grants Program. Amount \$ _____

Area of Learning for Funding Preference:

Social Studies & Fine Arts Lang Art/Debate/World Lang/English Lang Learners Science/Math
 Other/ Special Education/Technology etc. PE/Health Undesignated

Comments: _____

I would like my/our contribution to be **designated** to an individual teacher, school, PTSA/PTO/Booster Club or program.
Please direct my gift to:

School: _____ Teacher/Organization/Group: _____ Amount \$ _____

School: _____ Teacher/Organization/Group: _____ Amount \$ _____

Comments: _____

Payment Preference:

My check/money order is enclosed and payable to The Education Foundation Joint School District No. 2

I prefer to pay with one of the following: MasterCard Visa Visa Debit Card

/ /

Card Number

/

Expiration Date

Security Code
(last three digits on back)

Cardholder's Signature

Donor Information (Please Print)

Please check if you would like your gift to be anonymous

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Phone Number _____

Email: _____