

SCHOLARSHIP PROGRAM DONATION FORM

Donor Information

| NAME (FIRST OR BUSINESS) | NAME (LAST) |
|--------------------------|-------------|
| STREET ADDRESS | CITY |
| STATE | ZIP CODE |
| EMAIL | PHONE |

Donation Description

| CHECK ONE: PLEDGE DONATION PAYMENT CHECK # | _ | |
|--|---------------------|--|
| One-Time: \$\Box\$ \$\$,000 \$\$ \$10,000 \$\$ \$20,000 \$\$ \$30,000 \$\$ OTHER AMOUNT: | DATE: | |
| Yearly Option: \$500 \$1,000 \$2,000 \$3,000 PLAQUE INFORMATION: | | |
| My donation goes to: | on HS, 🛛 Ithaca HS, | |

□ St. Louis HS, □ All Gratiot High Schools

| One scholarship will be awarded to a senior from all six Gratiot County schools yearly. 100% of the donations will go towards the scholarship program. | Veterans Memorial Scholarships c/o Paul Hornak 510 Leeward Ct. Ithaca, MI 48847 CELL: 989-331-1168 EMAIL: P1HORNAK@GMAIL.COM |
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