



donation form

Thanks to you, Boise School District students will reach higher and go further.

DONOR

Donor name

Address

City

State

Zip

Phone number

E-mail

DONATION INFORMATION



Reach! I would like my donation to go to the Teacher Grant program.



Go! I would like my donation to go to a specific teacher, school, sport or club, PTO/PTA, or District-wide program.

Please specify recipient:

DONATION AMOUNT

\$50 \$100 \$250 \$500 \$1,000 \$_____

PAYMENT METHOD

Check enclosed payable to BPSEF .

Visa

Debit Card

MasterCard

Expiration
date

Security code
on back

Name on card

Cardholder's signature

Please increase my contribution to include a Merchant Service Fee (about 3%).

Please contact me about planned giving.