

Pine Forge Academy Foundation, Inc. Educational Scholarship Program

Benefactor Scholarship Donation Form



Please check all that apply:

- Yes, I would definitely like to create a special scholarship. Please contact me.
- I'm interested in creating a special scholarship
- Please continue to send me specific information about creating a scholarship
- Keep me informed about the scholarship program.

Name _____

Company/Organization _____

Address _____

City _____ State _____ Zip _____

Office or Home Phone _____

Mobile Phone _____

Email _____

Are a PFA alumnus? Yes No

If yes, years attended _____ Year Graduated _____

Total Enclosed: _____

<p>Please Check: <input type="checkbox"/> Master Card <input type="checkbox"/> Visa <input type="checkbox"/> American Express <input type="checkbox"/> Discover</p> <p>Credit Card Number _____ Exp. Date ____ / ____ CVV Code*</p> <p>Card Holder's Name _____</p> <p>Card Holder's Signature _____</p> <p><i>Make checks payable to:</i> Pine Forge Academy Foundation <i>Mail to:</i> Sabrina Dix / PFA Foundation / East 105th Street, Suite 245 / Cleveland, OH 44108</p>
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Pine Forge Academy Foundation welcomes your interest to become a Scholarship Benefactor. Feel free to contact our office at your convenience.

Sabrina Dix • PFAF / Director of Operations / 216.851.1018 • sdix@pfafoundation.org

***For security purposes, please call the office to give the 3 digit code on the back of the card.**