

# PFA Foundation Work Study Donation Form



*Benefiting The Luther R. Palmer, Jr.  
Work Study Program*

Name(s) \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Mobile Phone \_\_\_\_\_  
Email \_\_\_\_\_

Enclosed is my donation of \_\_\_\_\_

Enclosed is my donation pledge of  
 \$10 per month     Other: \$ \_\_\_\_\_

Please accept this pledge for:  
 LIFER Workstudy Program \$ \_\_\_\_\_  
 General Operating Fund \$ \_\_\_\_\_  
Total Amount \$ \_\_\_\_\_

*Make checks payable to:*  
Pine Forge Academy Foundation  
  
*Mail to:*  
Sabrina Dix  
PFA Foundation,  
East 105th Street, Suite 245  
Cleveland, OH 44108

**My/our monthly pledge honors the memory of:**

\_\_\_\_\_

- Enclosed is my check in the amount of: \_\_\_\_\_  
 Please continue to charge my card until given notice to stop the charges.  
 Please charge my/our credit card each month for the following years:  
 2016     2017     2018     2019     2020     2021

Indicate your choice of years above and add more years if you wish:

\_\_\_\_\_

**Invoice me/us**     Annually     Semi-Annually     Quarterly

Please Check:     Master Card     Visa     American Express     Discover

Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_ / \_\_\_\_

Card Holder's Name \_\_\_\_\_

Card Holder's Signature \_\_\_\_\_

For security, call the office at 216.851.1018 to give the 3 digit code on the back of the card.  
Email: [sdix@pfafoundation.org](mailto:sdix@pfafoundation.org) / [info@pfafoundation.org](mailto:info@pfafoundation.org)