

# GENERAL DONATION FORM



## Donor Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

I would like to charge my donation to a credit card. Please contact me.

## Gift Amount (please check one)

\$500

\$200

\$100

\$50

Other Amount: \_\_\_\_\_

## Payment Options

I have enclosed a check

I would like to charge my contribution

**Thank you for your support.**

### Mail to:

**Make check payable to:  
Pine Forge Academy Foundation**

**Pine Forge Academy Foundation  
Attn: Cynthia Poole  
c/o Allegheny East Conference  
767 Douglass Drive Douglassville, PA 19518**

## Honor/Memorial Gifts

If you would like to honor someone with your contribution, please indicate the honoree's name below. If you would also like us to send them an acknowledgment informing them of your contribution, please include their address.

### Honoree's Information

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

### Honoree's Address Information

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Honoree's Message \_\_\_\_\_

Your gift can be designated for a specific purpose or program. Otherwise, it will be entered in PFAF's general fund.

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