

2017/2018 ELCA Fund Donor Contribution Form

Salutation: Mr. Mrs. Ms. Mr. & Mrs. Other _____

Donor Name _____

(As you would like for it to appear in the 17/18 Annual Report)

Donors are listed alphabetically in the Annual Report. The amount of your contribution is kept confidential.

OR *I wish to remain anonymous*

Address _____

Home Phone _____ Cell Phone _____

Email Address _____

Please direct my gift in the amount of \$ _____ to one of the following areas:

- ELCA Excellence
- Families Helping Families Financial Aid Fund
- I do not have a preference, apply my gift where most needed.

Please mail your check made payable to ELCA:

Al Hosford, Director of Advancement
Eagle's Landing Christian Academy
2400 Hwy 42 North
McDonough, GA 30253

Donor Relationship to School:

- | | |
|---|--|
| <input type="checkbox"/> Current Parent | <input type="checkbox"/> Alumni Class of _____ |
| <input type="checkbox"/> Current Student | <input type="checkbox"/> Alumni Parent |
| <input type="checkbox"/> Grandparent | <input type="checkbox"/> ELCA Faculty/Staff |
| <input type="checkbox"/> Other Relative (Aunt, Uncle, etc.) | <input type="checkbox"/> Friend of ELCA |
| <input type="checkbox"/> Partner in Education | <input type="checkbox"/> Corporation |
| <input type="checkbox"/> Other – Please Specify _____ | |

IMPORTANT – Please read and sign below:

*I understand that if I direct my donation to the Families Helping Families Financial Aid Fund it will be used to create a pool of funds for families who qualify for assistance and **not applied to a specific student.** ELCA is classified as a 501(c) 3 nonprofit, tax exempt institution. All gifts are tax deductible as allowed by law.*

Donor Signature

Thank you for investing in the mission of ELCA!