

Donation Form



Donor Information (please print or type)

Name	
Billing address	
City	
State	
ZIP Code	
Telephone (home)	
Telephone (business)	
Fax	
E-Mail	

Pledge Information

1. Do you want to make a one time or a recurring donation?
 one-time donation recurring

2. Choose the amount you want to donate:

\$1,000.00 \$500.00 \$250.00 \$50.00 other.

3. Designate this donation to:

Sponsor a student

Purchase textbooks

Teacher development

General support

4. Additional Notes:

Acknowledgement Information

Please use the following name(s) in all acknowledgements:

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_____ I (we) wish to have our gift remain anonymous.

Signature(s)
Date

Please make checks, corporate matches, or other gifts payable to:

Middle College National Consortium
27-28 Thomson Avenue, Suite 331
Long Island City, NY 11101