



DONOR INFORMATION

First name	Maiden name	Last name	SH grad? <input type="checkbox"/> Yes ►	Year
Street Address line #1		Street Address line #2		
City, State, Zip		Phone		
Country if not USA		Email address		
Does your employer have a matching program? <input type="checkbox"/> Yes (Provide employer's contact information) ► <input type="checkbox"/> No (No need for employer's info)		Employer's contact information (for match program)		
DONOR PREFERENCE <input type="checkbox"/> Keep my donation anonymous		(Optional) This donation is in memory/honor of		

DONATION LEVEL

- | | | |
|----------------------------------|--------------------------------|--------------------------------------|
| <input type="checkbox"/> \$2,500 | <input type="checkbox"/> \$500 | <input type="checkbox"/> \$100 |
| <input type="checkbox"/> \$1,000 | <input type="checkbox"/> \$250 | <input type="checkbox"/> Other _____ |

DONATION ALLOCATION

- | | |
|---|---|
| <input type="checkbox"/> Where it is needed most
<input type="checkbox"/> Scholarships and tuition assistance
<input type="checkbox"/> Athletics – general
<input type="checkbox"/> Athletics _____ (specific program) | <input type="checkbox"/> Fine arts
<input type="checkbox"/> Performing arts
<input type="checkbox"/> Teacher enrichment
<input type="checkbox"/> Other _____ (specify) |
|---|---|

PAY BY CHECK: Make checks payable to: Friends of St. Hubert

SEND THIS FORM AND YOUR PAYMENT TO
 Friends of St Hubert, 7320 Torresdale Avenue, Philadelphia, PA 19136

THANK YOU!

ON-LINE DONATION SYSTEM COMING SOON!

7320 Torresdale Avenue • Philadelphia, Pa 19136
 Email: FriendsofStHubert@gmail.com