



PLEASE RETURN WITH SUMMER REGISTRATION FORM, LAST DAY TO TURN IN IS FRIDAY, SEPTEMBER 9TH

Yes, I want to help continue the outstanding programs my child enjoys at Eastbluff!

All donations are confidential and tax deductible, Eastbluff PTA, a 501(c)(3), Tax I.D. #33-0842668

Student Information: (One form per family)

Name: _____ Teacher/Grade _____

Name: _____ Teacher/Grade _____

Name: _____ Teacher/Grade _____

At an average cost of \$500 per student, your voluntary donation will fund the PTA sponsored programs through the school. Thank you for helping us continue our outstanding programs!

- **\$3000 Platinum Benefits Include:** PTA Membership, Top tier year round sponsorship for ALL PTA Eastbluff fundraisers, Access to incentive parties without any additional donation required, Complimentary Family Tile, Eastbluff student hoodie, and will also receive up to four VIP seats to all school events to enjoy or gift to family and friends.
- **\$1800 Gold Benefits Include:** PTA Membership, Access to incentive parties without any additional donation required, Complimentary Family Tile and Eastbluff student hoodie
- **\$1150 Silver Benefits Include:** PTA Membership, Complimentary Family Tile and Eastbluff student hoodie
- **\$500 Bronze Benefits Include:** PTA Membership, Eastbluff student hoodie
- **\$_____ Other** Every donation of any amount is much appreciated!
- **No contribution at this time.** Please complete student information above, and return to your child's teacher in a sealed envelope.

Payment Information: (Please complete ALL FIELDS)

Contact Name: _____ Phone: _____

Email Address: _____

Donation online (Please Attach Online Receipt)

One Time Payment Go To: eastbluffpta.membershiptoolkit.com

Recurring Payment Go To: www.EastbluffPTA.com

Corporate Matching Information:

- My employer has a corporate matching program. (please ask HR if your company can help.)
- I will be obtaining the necessary paperwork and submitting as soon as possible.
- Please contact my company for me

Company Name: _____

Contact Person and Phone: _____

Signature: _____ Date: _____