



friends of elysian
Annual Appeal 2019/2020

**Thank you for supporting the
Friends of Elysian 2019/2020 Annual Appeal!**

I will contribute to the Friends of Elysian Annual Appeal 2018/2019 at the following level:

- Eagle: \$10,000+ Benefactor: \$2,500 Sustainer: \$250
- Champion: \$7,500 Patron: \$1,000 Friend: \$100
- Leader: \$5,000 Partner: \$500 Other: \$____

INSTRUCTIONS: Please complete this form either by printing and filling it out by hand or by "clicking into" each field in the electronic PDF. If you choose to fill it out on your computer, make sure to "Save as" and then rename it, otherwise the changes will not take and your document will be blank.

Section 1 YOUR INFORMATION

Donor Name(s) _____

Street Address _____ City, State, Zip _____

Phone Number _____ E-mail _____

RELATIONSHIP TO ELYSIAN CHARTER SCHOOL (PLEASE CHECK ALL THAT APPLY):

- Current Parent Faculty/Staff Alumni Student Other
- Current Extended Family Alumni Parent Friend

Section 2 DONATION AND METHOD OF PAYMENT

I/WE WOULD LIKE TO DONATE A TOTAL CONTRIBUTION OF \$_____. PLEASE CHOOSE ONE:

- Check: A contribution for the amount above is enclosed. Please make check payable to *Friends of Elysian Charter School*
- Credit Card: Please charge the donation amount to the following credit card: AMEX Visa Mastercard

Name on Card: _____ Card Number _____

Billing Address _____ City, State, Zip _____

Expiration _____ CVV2 (Security Code) _____

Section 3 COMPANY MATCH?

*Nearly 10% of funds raised in 2018/2019 came from company matching!
Please consider looking into this potential opportunity at your workplace.*

- Yes! Name of Company _____ No

Section 4 ACKNOWLEDGEMENT

PLEASE CHOOSE ONE:

- I authorize *Friends of Elysian Annual Appeal 2019/2020* to publicly acknowledge my donation. (Amounts will not be cited.)
- IMPORTANT!** I/We would like my/our name(s) listed as: _____
(As relevant, please include any additional persons and specify different and/or hyphenated last names.)
- Anonymous

All contributions are tax-deductible to the extent allowed by law. Tax ID# 22-3536228

Section 5 SEND *If you would prefer to make a secure online donation, please go to www.ecsnj.org/support-ecs/donation-form.*

Please mail the completed form (with donation if paying by check) to the address below, or drop it off to Deb or Susan in the school office.
Friends of Elysian Annual Appeal • 1460 Garden Street • Hoboken, NJ 07030

Thank you for your support!