FRIENDS OF THE FEATHER RETURN FORM





I would like to IGNITE POSSIBILITIES with a Friends of the Feather gift:

Warrior \$2,500 Pioneer \$1,000 Trailblazer \$			
BUSINESS/ORGANIZATION/FAMILY NAME: FIRST & LAST NAME: FULL ADDRESS: PRIMARY EMAIL: PREFERRED PHONE NUMBER:			
		NAME AS YOU WOULD LIKE TO BE ACKNOWLEDG	ED:
		I would like my donation to be anonymous.	Are you a WAHS alum? Let us know!
			Class of
		PAYMENT OPTIONS	
Enclosed check made payable to WAPEF	Credit Card Payment (Scan QR code)		
Contact me to pay via credit card in monthly or quarterly installments.			
RETURN THIS FORM TO: The Wilson Area Partners in Education Foundation			

THANK YOU FOR YOUR SUPPORT!

c/o Kimberly Hopkins

Your Friends of the Feather contribution is tax-deductible to the fullest extent allowable by law. WAPEF EIN# 59-3815533

2040 Washington Boulevard, Easton, PA 18042

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