

# Annual Fund 2020-2021 Donation Form

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Full Name: \_\_\_\_\_

Name for Giving Publications: *(Example: The Smith Family)* \_\_\_\_\_

This gift is made (circle one) in honor / in memory of: \_\_\_\_\_  
*(optional)*

## Select Your Giving Level

Yes, I will donate to Arbor's 2020-2021 Annual Fund at the following level and amount:



Leadership Circle (\$5,000 minimum): \$ \_\_\_\_\_



Phoenix Society (\$1,000 minimum): \$ \_\_\_\_\_

Friends of Arbor (up to \$999): \$ \_\_\_\_\_

No, please contact me with more information about the benefits of the Annual Fund.

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## Payment Information

Please select one of the following giving arrangements; whatever is most convenient for you!

- I have attached a check for my 2020-2021 Annual Fund donation.
- I have paid in full on Arbor's website: [arbormontessori.org/giving](http://arbormontessori.org/giving)
- Please add my Annual Fund payments to my FACTS account, to coincide with my tuition payment schedule. *Scheduled payments can begin November 2020 and continue to January 2021.*
- Please charge my Annual Fund payment in full to the credit card **listed below**.
- Please set up my Annual Fund payment into the installment option checked below, and charge it to the credit card **listed on this form**.
  - 6 payments of \$ \_\_\_\_\_ **each**, November 2020 through April 2021
  - 2 payments of \$ \_\_\_\_\_ **each**, in November 2020 and April 2021
  - 2 payments of \$ \_\_\_\_\_ **each**, in March and April 2021

## Credit Card Information

Cardholder Name \_\_\_\_\_

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_

Billing Address \_\_\_\_\_  
\_\_\_\_\_

Email for Receipt \_\_\_\_\_

**Arbor accepts Visa, MasterCard, or Discover cards only, we do not accept American Express.**

*No fees will be charged in conjunction with your payment. The minimum monthly payment amount that can be charged is \$10.*

## Payment Authorization

*By signing below, I authorize Arbor Montessori School to charge for payment to my Annual Fund pledge, as stated on this form.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date