

La Cañada Flintridge Educational Foundation Gift/Pledge Form

Student Name:		
Parent Name:	Email:	Cell:
Parent Name:	Email2:	Cell2:
Address:	Home Phone:	
Children Name/s, Grade/s & School/s (at all LCUSD schools)	:	
Gift Amount:	Form of Payment:	
□ \$10,000 (Platinum Partner yard sign, (2) Gala Tickets, (2) Poker Tickets (2) LP Frames*)	□ Check #:	
\$5,000 (Platinum Partner yard sign, (2) Poker Tickets (2) LP Frames*)	Please charge my credit card: Divide the selected gift amount into equal monthly installments, until I notify you otherwise.	
□ \$3,500 Platinum Partner (Platinum Partner yard sign, (2) LP Frames*)	☐ Divide the selected gift amount into 10 equal monthly installments (September – June). ☐ I DONATED ONLINE!	
□ \$2,000 (Gold Partner yard sign, (1) LP Frame*) □ \$500 (School Family Supporter yard sign)	□VISA □M/C□AMEX □DISC	
☐ Other/Any \$	Exp. Da	ate CSV#
* Limited Availability and payment information must be provided on this form to receive this item at Back to School Night (BSTN).	Credit Card Billing Address (if different from above):	
Endowment: I would like to make an additional gift of \$	to the Endowment Fund, which is invested in perpe	etuity to ensure ongoing health and vitality of our schools.
Pledge: While not making a cash gift tonight, we pledge to make gifts totaling the spring. <u>Pledging does not qualify you to receive a LP Frame.</u>	ing \$ during the 2025-2026 school	year. Please remind us of this pledge and any pledge balance in
Partners in Excellence: I'm interested in learning more about LCFEF's Bu Company Matching: If your company matches charit	asiness Partners in Excellence (PIE) Program. Please cont	

Company Matching: If your company matches charitable donations, please initiate a request from your company to match your donation to LCFEF

Matching gifts are credited towards your family contribution.



Scan the QR code to "DONATE NOW"

Or visit LCFEF.org click on "DONATE NOW"