



SACRED HEART SCHOOL

410 North "M" Street • Lake Worth, Florida 33460
(561) 582-2242

*Thank you for contributing to our 2010-2011 Gift Giving Appeal.
With your gift, Sacred Heart will continue its tradition
for another 65 years of Catholic education*

Gift \$1,000 \$500 \$250 \$100 \$50 Other: \$ _____
 My gift will be matched by the following company: _____

Method of Payment

A check for the full amount is enclosed.

All checks must be made out to **Sacred Heart School** with the memo **2010-2011 GIFT**

Please charge my gift to: Visa MasterCard American Express

Account Number _____ Exp. Date _____

Cardholder Name _____ Security # _____

Billing Address _____

Signature _____ Date _____

This gift is tax deductible as allowed by law. A gift of any amount is appreciated.

Donor Information

Name(s) _____ Class of _____

Check all that apply

Alumna/Alumnus Current Parent Parent of Alumna/Alumnus Grandparent Faculty Friend

Email Address _____

Street _____

City _____ State _____ Zip _____ Phone _____

I/We wish to remain anonymous

All donations paid in cash must have donor information.