

THE BRONXVILLE SCHOOL FOUNDATION

A community commitment to public education.

Thank you for your generous gift of:

\$10 \$25 \$50 \$100 \$200 Other

Name _____

Address _____

Telephone: (H) _____

E-Mail: _____

Class _____ Maiden Name _____

Gift Enclosed: \$ _____

My company will match my gift

THIS GIFT IS FOR:

_____ General Use _____ Endowment

I do not wish to be listed in the Annual Report of Donors.

Please make checks payable to:
The Bronxville School Foundation, Inc.

HAVE YOU SET YOUR NAME IN STONE?
BUY A BRICK FOR THE
"ALUMNI WALK"
Complete reverse side of card

*Your gift to The Foundation will be used to support the
Bronxville Public School and is tax deductible.*

Thank you very much for your support.

The Bronxville School Foundation

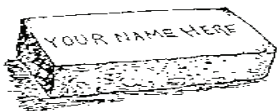
177 Pondfield Road

Bronxville, New York 10708

(914) 395-0515

www.bronxvilleschoolfoundation.org

"ALUMNI WALK" BRICK ORDER FORM



Use one form for each brick. To place an additional order, please copy this form. Please print.

DONOR INFORMATION

Name _____

Address _____

Telephone: (H) _____

Donation Level:

\$150 - 4X8 brick

\$500 - 8X8 brick

Please indicate if this brick is being purchased

in Honor of OR in Memory of an alumna/us

Please include a note of address for notification of brick purchase if other than donor.

BRICK INFORMATION

Maximum 14 characters per line

Leave space where needed

If alumni, please include maiden name

One name per brick

(FIRST, MIDDLE/MAIDEN NAME)

(LAST NAME)

(CLASS YEAR)

Please make checks payable to:
The Bronxville School Foundation, Inc.

Proceeds from the purchase of a brick provide grant money to continue our legacy of excellence in education.