

# Eagle Rock Middle School



Where Eagles ROCK!  
Respect & Responsibility  
Organization \* Character \* Knowledge  
It's an *EAGLE* thing!

## EAGLE ROCK MIDDLE SCHOOL SCHOOL DONATION FORM

Please complete this form and turn it in to the school office with your donation. Thank you for your support!

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Donation Amount: \$ \_\_\_\_\_ Payment Method: \_\_\_ Check \_\_\_ Cash

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

I would like my donation to be used for the following purposes. *(If you would like to divide your donation between different categories, please designate the amount to each.)*

Donate to these categories	Donation Category	Description	Donation Amount
	School Account	Donations will be used as needed to meet the needs of students and teachers in the school.	\$
	Technology	Donations will be used to purchase technology devices and/or supplies.	\$
	Media Center	Donations will be used to purchase library books, supplies, and devices like e-readers.	\$
	Other	Please specify.	\$

## THANK YOU! THANK YOU! THANK YOU!

(RECEIPT)

*Eagle Rock Middle School is very grateful for your generous gift of \$ \_\_\_\_\_. Your charitable donation will help provide our students and teachers with equipment, activities and/or supplies that would not be possible without support from people like you. Thank you again for choosing Eagle Rock Middle School for your donation.*

Signature – Eagle Rock Official: \_\_\_\_\_ Date: \_\_\_\_\_

*(Please retain this receipt for your records. Please be advised that as a school district and a subdivision of the state of Idaho, we are tax exempt under Section 501(c)(3) and 170(c)(1), and your donation could be eligible for a tax credit or a tax deduction.)*

**FOR OFFICE STAFF:** *Please verify the donation, make a copy of this form and retain it for school records, give the original form back to the donor. Thank you.)*