

Alumni and Friends of Belmont High School, Inc.

Scholarship Donation Form

Please provide the following contact information:

Name _____

Street Address _____

City _____

State _____ Zip Code _____

Country _____

Phone _____

E-mail _____

If BHS alum, Class Year _____

___ This donation is for the general scholarship fund

___ This donation is (___) in honor of or (___) in memory of _____

___ This donation is for an existing named endowment

Name of fund: _____

___ This donation is to start a new named endowment fund

Name of fund: _____

Contribution Levels

\$5000 (or more) ___ Patron of BHS

\$2500-4999 ___ Sponsor

\$1000-\$2499 ___ Benefactor

\$500-999 ___ Dean's List

\$100-499 ___ Honor Roll

\$25-99 ___ Scholar

\$_____ ___ Other

Amount of contribution _____

Please mail this form with your check (if not using Paypal) to

AFBHS

PO Box 40

Belmont, MA 02478

No goods or services were provided in return for your gift; therefore your contributions are tax deductible to the full extent of the law.

Thank you for your support!