



This year's suggested donation is \$1000 per student

\$2000 suggested for families with two students

\$3000 for three student families and so on

P.O. Box 1146
Los Altos, CA 94023
650.940.4670

MVLAFoundation.org
info@mvlafoundation.org

Please fill out this form, and send it with your check or credit card information.

Although the suggested donation is \$1000 per student, any amount is appreciated. Participation matters.

Donor Name: _____

I prefer to keep my gift anonymous. Do not list my name in the Annual Report.

Street Address: _____

City and Zip: _____

Telephone: _____ Email: _____

Student Name: _____ Student Name: _____

School: _____ School: _____

Grade: _____ Grade: _____

Donation matched by: _____

You will need to contact your employer directly to being the matching donation process.

Check attached for: \$ _____

Charge donation in the amount of: \$ _____ Visa MasterCard Discover Amex

to Credit Card #: _____

Expiration Date: _____ Card Security Code: _____

Signature: _____

Please contact me about donating to the MVLA High School Foundation Endowment Fund.

THANK YOU FOR INVESTING IN INNOVATION AND EDUCATIONAL EXCELLENCE!