



SUPPORT YOUR KENTFIELD SCHOOLS!

Name: _____ Phone: _____ - _____

Address: _____ City: _____ Zip Code: _____

Email/Parent 1: _____ Email/Parent 2: _____

Employer P1/matching gift: _____ \$ _____ Employer P2/matching gift: _____ \$ _____

I prefer to be anonymous in all publications

<input type="checkbox"/> Bill Gates	\$10,000 (\$37.03/day for 9 months)	<i>contribution levels to attend the Principal's Circle Party</i>
<input type="checkbox"/> Ella Fitzgerald	\$ 7,500 (\$27.77/day for 9 months)	
<input type="checkbox"/> Mark Twain	\$ 6,500 (\$24.07/day for 9 months) or \$3500 for single child families (\$12.96/day for 9 months)	
<input type="checkbox"/> Frida Kahlo	\$ 4,500 (\$16.66/day for 9 months)	
<input type="checkbox"/> Charles Darwin (Cost To Educate)	\$ 1,800 (cost to educate/child) x _____ = \$ _____ <small>Children in District</small>	
<input type="checkbox"/> Amelia Earhart	\$ 1,000 (\$3.70/day for 9 months)	
<input type="checkbox"/> Frank Lloyd Wright	\$ _____ Other (Every donation helps us get to 100% participation!!)	

* Monthly installment period begins approx. one month after this form is received and ends on May 1, 2017. Installment amounts will vary accordingly.

TOGETHER, WE'RE ENSURING OUR KIDS GET A TOP-QUALITY EDUCATION

Your money helps fill the \$1800 per child per year gap between government funding and the cost of providing your kids with the education they need to be successful in life. Your contribution helps ensure smaller class sizes, classroom aides, credentialed librarians, subject specialists, 7th period at Kent, and these basic programs and important classes:

Bacich: Computers, Technology, Music, Art, Physical Education, STEAM, Maker's Carts

Kent: Computers, Technology, Physical Education, Art, Drama, Spanish, Enterprise, STEAM & Maker's Space, Band & Chorus, and Poetry

Go Green! Pay online at www.kickschools.org

I have donated online at **kickschools.org** Check enclosed I will contact **kik** to arrange my gift of stock

Please charge my credit card: VISA MC AMEX

Credit Card #: _____ Exp. Date: _____ / _____

Signature: _____ CSV#: _____

Billing address if different from mailing address: _____

I would like to pay in monthly installments

* Monthly installment period begins approx. one month after this form is received and ends on May 1, 2017. Your monthly installment amount will be calculated based on that time period (example: \$1800 for 5 months will be \$360/month).

Special Instructions: _____

Matching Gift Additional Info: _____

Let's get to 100% participation! Donate now at kickschools.org

Please mail this form with payment to: **kik**-Kentfield Schools Foundation 750 College Avenue Kentfield, CA 94904
415.458.5140 tel 415.458.5137 fax foundation@kentfieldschools.org www.kickschools.org A Non-Profit 501(C)3 EIN 94-2665-683