



Foundation

FOR VANCOUVER PUBLIC SCHOOLS



2019-20 Community Partnership Agreement

Date _____

Sponsoring organization/individual _____

Contact name _____ Title _____

Billing address _____

City, State, Zip _____

Phone _____ Email _____

Website _____

Type of Support:

- Donation Only
- Grant
- Luncheon Sponsorship

Level of Support:

- Community Champions' Circle
\$5,000 now, or 3-year pledge of \$10,000 or more combined
I pledge \$_____ over _____ (#) years
- Luncheon Sponsorship (starting at \$1,750)
Amount: \$_____ (see levels on sponsorship table)
- Other \$_____
- Contact us to customize use of funds and/or funding schedule

Payment:

Credit card type: Visa, MC, Amex, Disc _____ Exp date _____

Card number _____ CVS number _____

Name on card _____

Authorized signature _____

- Please send an invoice

Send checks, payable to: Foundation for VPS, PO Box 6039, Vancouver, WA 98668-6039

Questions? Please contact: Nada Wheelock, Executive Director, 360.313.4730, FoundationVanPS@vansd.org