



Foundation

FOR VANCOUVER PUBLIC SCHOOLS

2020-21 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
- In-Kind

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** (\$1,750 / \$2,500 / \$5,000 / \$10,000 – See sponsorship overview)
Amount: \$_____
- Other**

- Contact us** to customize use of funds and/or funding schedule

Payment:

- Please send an invoice
- Check (payable to Foundation for VPS, PO Box 6039, Vancouver, WA 98668-6039)
- Credit card type: Visa, MC, Amex, Disc Exp date _____
Card number _____ CVS _____
Name on card _____
Authorized signature _____

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