



BURLINGAME COMMUNITY
EDUCATION FOUNDATION

Donate to BCE

Donor Information

Name(s) for Annual Report _____

Address _____

E-mail Address _____

Phone _____

- | | | |
|---|---|---|
| <input type="checkbox"/> \$500 Sponsors one child | <input type="checkbox"/> \$1,500 Patron | <input type="checkbox"/> \$5,000 Founder's Circle |
| <input type="checkbox"/> \$1,000 Scholar | <input type="checkbox"/> \$2,500 Benefactor | <input type="checkbox"/> \$10,000 Honor's Circle |

Payment Method

Visa/MasterCard # _____ - _____ - _____ - _____ Exp Date _____

Signature _____ Print Name _____

Please check all applicable boxes

- | | | |
|---|---|--|
| <input type="checkbox"/> Parent | <input type="checkbox"/> Grandparent | <input type="checkbox"/> Burlingame Resident |
| <input type="checkbox"/> BSD Staff | <input type="checkbox"/> Local Business | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Please contact me about Employer Matching/United Way/ Stock Donation | | |
| <input type="checkbox"/> Please keep my/our donation anonymous | | |

Please indicate the school(s) your child(ren) attend and how many at each school

BIS _____ Franklin _____ Lincoln _____

McKinley _____ Roosevelt _____ Washington _____

Please indicate the number of children in each grade level

Pre-K _____ K _____ 1st _____ 2nd _____ 3rd _____

4th _____ 5th _____ 6th _____ 7th _____ 8th _____

Please mail this form, with contribution to:

Burlingame Community for Education Foundation
P.O. Box 117730
Burlingame, CA 94011

If you have questions, please contact BCE.

Call 650-259-3824 or email Nicole Johnson at nicolejohnsonbce@gmail.com.