

NEWPORT ELEMENTARY FOUNDATION



Become a Member, **JOIN THE FOUNDATION**

Starting at just **\$1.37** a day

FAMILY INFORMATION

Name(s) _____ List the name of the donation as _____

Billing/Mailing Address _____ City _____ State _____ Zip Code _____

Email _____ Phone Number _____

FOUNDATION MEMBERSHIPS

PACIFIC LEVEL MEMBER _____ x Student(s) - \$2,500 Donation **OR** 10 Payments of \$250

NEWPORT LEVEL MEMBER _____ x Student(s) - \$1,000 Donation **OR** 10 Payments of \$100

BALBOA LEVEL MEMBER _____ x Student(s) - \$7500 Donation **OR** 10 Payments of \$75

FOUNDATION MEMBER _____ x Student(s) - \$500 Donation **OR** 10 Payments of \$50

FAMILY GIVING OPTION – Please accept a donation of \$ _____ on behalf of _____ (Student Name)

ONE TIME PAYMENT

MONTHLY PAYMENTS

PAYMENT METHOD

VENMO @NewportElFoundation

PAYMENT LINK includes Apple Pay & Google Pay

ONLINE: at www.newportelfoundation.org

CREDIT CARD: (circle one) MasterCard Visa American Express

Credit Card # _____ Expiration ____/____ Security Code _____

Name on Card _____ Phone Number _____

Signature _____ Zip Code for billing _____

CHECK: PAYABLE TO "NEWPORT ELEMENTARY SCHOOL FOUNDATION" (include check with this form)

****SPONSORSHIP OPPORTUNITIES AVAILABLE****

contact@newportelfoundation.org