



## Donation Form

I am enclosing \$\_\_\_\_\_.

*My contribution is given as a:*

- Memorial, in memory of: \_\_\_\_\_
- Tribute, in honor of: \_\_\_\_\_
- Scholarship Donation
- Friend of ASD Donation – \$100
- Blue & Gold Donation – \$500
- Superintendent's Circle Donation – \$1000
- 1850 Club Donation – \$5000+

*If this is a Memorial or Tribute Donation, please provide information where an acknowledgment should be sent:*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

*Donor Information:*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_ (v/t)

All donors may be listed in Foundation newsletters & other media. If you wish to remain anonymous, please check here:

Signature: \_\_\_\_\_

Checks should be made payable to Arkansas School for the Deaf Foundation. The Arkansas School for the Deaf Foundation is a 501©3 non-profit organization. All contributions are tax deductible.

*Please mail to:*  
**ASD Foundation**  
**2400 West Markham**  
**Little Rock, AR 72205**

Donations may also be made by credit card online. Visit [www.asd-foundation.com](http://www.asd-foundation.com) for more information.  
Thank you for your support of the Arkansas School for the Deaf!