



Kiddo! Community Business Partner 2018 - 2019
Yes, I Believe Quality Education is Everyone's Business!

Business Name: _____

Type of business: _____

Contact Person: _____

Phone: _____

Address: _____

City/Zip: _____

Email: _____

Website: _____

I would like to be a Business Partner (refer to Benefits Page included):

- \$7,500 District Leader
- \$5,000 District Partner
- \$2,000 School Partner

- \$1,250 Grade Partner
- \$850 Classroom Plus Partner
- \$450 Classroom Partner

Total Donation: \$ _____

Payment Options: Recognition begins after first donation is RECEIVED

- One Time** – my check is enclosed or charge my credit card below
- Multiple** – all payments may be adjusted to be received in full by **6/30/19**

All credit card charges will include 2.5% processing fee

Credit Card #: _____ Exp: _____ Security Code: _____

Name on card: _____

Billing Address: _____

Charge my credit card: \$ _____ per month for _____ months

Debit my checking account: \$ _____ per month for _____ months (Our preferred method: enclose a voided check)

Please donate online (www.kiddo.org) or mail form and payment to: **Kiddo! 409 Sycamore Ave., Mill Valley, CA 94941**
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