



Monthly Giving Club

Please help us fill in the funding gap and ensure the sustainability of Mill Falls for this year and beyond. JOIN TODAY and receive a \$10 gift certificate to Shorty's. PLUS we will draw a lucky name out of the hat every month to give away additional prizes from supportive local businesses! And as always, your donation to the MFCS Foundation is 100% tax deductible.

Your gifts will provide real benefits to MFCS students: **\$10/month** can provide a teacher with a professional development workshop; **\$25/month** will help to purchase three books every month to add to a student's classroom library; **\$50/month** can buy enough supplies for an entire classroom for the whole school-year; **\$100/month** can help provide substitute teacher coverage for the year to ensure our teacher-student ratios are met even when a teacher has to be out sick; and **\$150** per month can fill in the funding gap to provide a full year of education to your child.

Won't you become a monthly giving member today? Your recurring donation is secure and flexible. You choose the amount you wish to give each month, and you can change or cancel your pledge at any time. And if your employer matches, don't forget to sign up and double your gift! Your monthly donation will make a world of difference. I promise you. Thank you so much for your help.

PLEASE RETURN THE FORM BELOW TO:

MFCS Foundation, 36 Salmon Street, Manchester, NH 03104

YES, I _____ **would like to join the Monthly Giving Program**
(please print your name)

in the amount of \$10 \$25 \$50 \$75 \$100 \$150 (other)\$_____ **monthly.**

- I will mail a check out to MILL FALLS CHARTER SCHOOL FOUNDATION
[Note: if you bank online, you can arrange for your bank to automatically send payment monthly.]
- I prefer to pay by credit card, and ask that you process my request monthly via PayPal.
- I wish for this donation to remain anonymous (we understand, although we ask that you consider making your gift public to help us invite others along!)

Name on the Credit Card: _____

Credit Card Number: _____ **Exp. Date:** ____ / ____ **3 digit code** _____

Billing Address (street, state, zip): _____

Email: _____ **Telephone:** _____

Signature: _____ **Date:** _____ **Thank you!**