



LAFAYETTE 2015-2016

HSA DONATION & CLASS ACTIVITY FUND

Please fill out this form and return it to the HSA Donation Box in the Admin Trailer.

NAME OF DONOR(S): _____

BILLING ADDRESS: _____

EMAIL & PHONE: _____

NAME, GRADE & TEACHER OF EACH LAFAYETTE CHILD:

CREDIT CARD # & EXPIRATION DATE (or attach check made out to Lafayette Home & School Association)

HSA DONATIONS:

___ Check here to make a Golden L Donation of \$1,000

Families pay one flat fee of \$1,000. Payments can be made up front or split over four payments. (Utilizing the payment plan requires payment via the Lafayette website: <http://www.lafayettehsa.org/donate/>)

Check here

- ___ To acknowledge that a portion of your donation goes to membership in the HSA
- ___ If your employer matches your charitable donations

___ Check here to make an HSA Family Donation of \$500

Families pay one flat fee of \$500. Payments can be made up front or split over two payments.

Check Here

- ___ To acknowledge that a portion of your donation goes to membership in the HSA
- ___ If your employer matches your charitable donations

___ Check here to make a donation of another amount.

Please enter donation amount: \$_____

Check Here

- ___ To acknowledge that a portion of your donation goes to membership in the HSA
- ___ If your employer matches your charitable donations

CLASSROOM ACTIVITY FEE

\$100 per child. Funds go directly to classroom teachers to pay for field trips & other activities.

Please enter # of children: _____ x \$100 = _____

TOTAL (HSA Donation + Classroom Activity Fees): \$_____