



**HIGHLAND PARK EDUCATION FOUNDATION  
MAD FOR PLAID  
2016-2017 CONTRIBUTION CONTRACT**  
Benefiting HPISD Students and Teachers

Name \_\_\_\_\_

**Name to be used for all recognition** \_\_\_\_\_

Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_ Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

\_\_\_\_ I/We prefer to be listed as Anonymous.

**RETURN BY DECEMBER 31  
FOR RECOGNITION**

- |  |   |
|--|---|
| <input type="checkbox"/> <b>VISIONARY</b> (\$100,000 and up)       | Contributors at these levels receive                |
| <input type="checkbox"/> <b>TRUSTEE</b> (\$25,000-\$99,999)        | • Special media recognition throughout the campaign |
| <input type="checkbox"/> <b>SUPERINTENDENT</b> (\$10,000-\$24,999) | • All other benefits (below)                        |

- |   |  |
|---|--|
| <input type="checkbox"/> <b>PRINCIPAL</b> (\$7,500-\$9,999) | Contributors at these levels receive                         |
| <input type="checkbox"/> <b>TEACHER</b> (\$5,000-\$7,499)   | • Invitation to patron party on March 2 <sup>nd</sup> , 2017 |
| <input type="checkbox"/> <b>COUNSELOR</b> (\$2,500-\$4,999) | • Media recognition  |
| <input type="checkbox"/> <b>COACH</b> (\$1,000-\$2,499)     | • Yard sign  |



- |  |                                      |
|--|--------------------------------------|
| <input type="checkbox"/> <b>TUTOR</b> (\$500-\$999)      | Contributors at these levels receive |
| <input type="checkbox"/> <b>ROLE MODEL</b> (\$250-\$499) | • Media recognition                  |
| <input type="checkbox"/> <b>MENTOR</b> (\$100-\$249)     | • Yard sign                          |
| <input type="checkbox"/> <b>FRIEND</b> (up to \$99)      |                                      |

Gifts of \$500 or greater may be given \_\_\_\_ in honor of OR \_\_\_\_ in memory of someone special.

In honor/memory of \_\_\_\_\_ Given by \_\_\_\_\_

Send notification to \_\_\_\_\_

Address \_\_\_\_\_

**BILLING INFORMATION**

**Go to [www.madforplaid.org](http://www.madforplaid.org) to make a gift online.**

- |   |   |
|---|---|
| ____ Payment of \$ _____ enclosed<br>(check payable to Mad for Plaid)           | ____ One time donation by credit card of \$ _____   |
| ____ I/We pledge to pay \$ _____<br>by January 31, 2017.                        | ____ Payment Plan:<br>I/We authorize Mad for Plaid to initiate monthly electronic<br>charges to my credit card: |
| ____ <b>MATCHING FUNDS AVAILABLE</b><br>(Please enclose appropriate documents.) | ____ Amount of monthly donation \$ _____ Number of months _____   |
| ____ I/We would like to donate stock. I/We will<br>contact you with details.    | ____ Total gift \$ _____  |
|   | ____ Credit Card Number: _____  |
|   | ____ Exp. Date _____ Signature: _____   |