



# Southridge School DONATION FORM

Name (s) \_\_\_\_\_  
Please Print

Address \_\_\_\_\_  
Address and Street City Postal Code

Phone \_\_\_\_\_ Email \_\_\_\_\_

I/We would like to support Southridge School with a gift of:

\$ \_\_\_\_\_

\$100  
(approx. \$80 after tax)\*

\$500  
(approx. \$322 after tax)\*

\$1,000  
(approx. \$593 after tax)\*

\$2,500  
(approx. \$1,406 after tax)\*

\$5,000  
(approx. \$2,761 after tax)\*

\$7,500  
(approx. \$4,116 after tax)\*

\$10,000  
(approx. \$5,471 after tax)\*

\$20,000  
(approx. \$10,891 after tax)\*

\* Assumes maximum marginal BC personal tax rate.

For all donations, a charitable tax receipt will be issued. Charitable Registration Number 13960 6917 RR0001.

I/We would like to make this gift:  one-time

monthly  annually starting on the 5<sup>th</sup> of \_\_\_\_\_  
Month / Year

My/Our payment method is:  Credit Card (Visa or MasterCard)  Cheque payable to *Southridge School* (enclosed)

Number \_\_\_\_\_ Expiry \_\_\_\_\_ | \_\_\_\_\_ CW# \_\_\_\_\_

Name on Credit Card \_\_\_\_\_

Please direct my/our gift towards:  Greatest Need  Temporary Emergency Tuition Assistance (TETA)

Academics  Arts  Athletics  Other: \_\_\_\_\_

I/We would like to be recognized in the Annual Report as follows: \_\_\_\_\_

Please Print (example: John and Jane Smith, The Smith Family)

I/We prefer to remain anonymous

Donor Signature \_\_\_\_\_ Date \_\_\_\_\_

*Thank you for your support!*

## PRINCIPLES OF PHILANTHROPY AT SOUTHRIDGE

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Southridge School has the following underlying tenets which are fundamental to our donation programs:

1. Donations must be purely voluntary.
2. Donors receive no favour and non-donors suffer no penalty.
3. Donations, or a willingness to donate, are not taken into account in admission or re-admission decisions.
4. Donated funds must be used for capital purposes only and are not to be used to subsidize operating expenses.