



Donation Form

Thank you for your support!

Your gift will ...

- ✓ **Help** children with profound but hidden disabilities learn
- ✓ **Support** families struggling to cope with their child's challenges
- ✓ **Change** lives through progressive academic and therapeutic approaches

Donor Information:

Name(s) _____

As it is to be published or ☐ I prefer this gift be anonymous

Agency _____

Address _____

City/State/Zip _____

Phone (_____) _____ Email _____

Commemorative gifts:

My gift is: ☐ In Memory of (deceased) ☐ In Honor of (living: anniversary, birthday, holiday)

Name: _____

Please notify, name: _____

Relation to above: _____

Address: _____

City/State/Zip: _____

Payment Information:

☐ Check enclosed. (Payable to: Pace School)

☐ Employer Match Form enclosed.

☐ Apply gift to my credit card:

Credit Card # _____ CVV _____ Exp. Date _____

(3 digit V code)

Signature _____ Date _____

Gifts to Pace School are tax-deductible as provided by law. The official registration and financial information of Pace School may be obtained from the Pennsylvania Department of State by calling 1-800-732-0999. Registration does not imply endorsement.

**For more information contact Development Manager at 412-342-4385 or tnorris@paceschool.org
Mail Form to Tricia Norris, 2432 Greensburg Pike, Pittsburgh, PA 15221**