

Name: _____

MY/OUR GIFT TO
THE BRENTWOOD FUND: \$ _____

I AM A...

- Current Family Alumni Faculty/Staff
 Parent of Alumni Grandparent Friend

PAYMENT INFORMATION:

Check enclosed. Check #: _____
(PLEASE MAKE CHECKS PAYABLE TO: BRENTWOOD SCHOOL)

Payment by Credit Card:

- Visa Mastercard AMEX

Credit Card #: _____

Expiration Date: _____

Name of Cardholder: _____

Signature: _____

**MY/OUR PLEDGE TO
THE BRENTWOOD FUND:**

\$ _____

will be paid by: _____

PLEASE PLAN TO FULFILL YOUR PLEDGE
BEFORE APRIL 30, 2024

HELPFUL LINKS

bwscampus.com/give
bwscampus.com/pledge
bwscampus.com/matchinggifts
bwscampus.com/securities

LEVELS OF SUPPORT

Friends: Up to \$1,499
Honor Roll: \$1,500-\$4,999
Advocates: \$5,000-\$9,999
Partners: \$10,000-\$14,999
Leadership Circle: \$15,000-\$24,999
Head of School Circle: \$25,000-\$49,999
Founders Circle: \$50,000-\$74,999
Legacy Leadership: \$75,000 and Up