



## MEMORIAL AND HONORARY GIFT PROGRAM FORM

Donating to the SAISD Foundation or the SAISD Foundation Endowment is a meaningful way to honor someone special. Your gift reflects your desire to make an impact on the lives of others, just as your honoree has done for you. Certificates recognizing this honor will be mailed to the person being honored or their family members as indicated. Donor may be recognized or gifts may be given anonymously.

### Donor Information

Individual Making the Gift \_\_\_\_\_

Address \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail \_\_\_\_\_

I would like this gift listed as \_\_\_\_\_

Direct my gift to  SAISD Foundation (annual needs)  SAISD Foundation Endowment (long-term)

### Gifts In Honor of

Name of Person being honored \_\_\_\_\_

Reason for Honor (i.e. birthday, end of school year, employment anniversary, holiday gift, to honor his or her dedication to education etc.). \_\_\_\_\_

Your Relationship (i.e. parent, former student, friend, son etc.) \_\_\_\_\_

I would like to have a certificate sent noting this gift made in his or her honor.

Address \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Email \_\_\_\_\_ Include my name  Yes  No | Include gift amount  Yes  No

### Gifts In Memory of

Name of Person being remembered \_\_\_\_\_

Your Relationship (i.e. child, parent, former student, friend, etc.) \_\_\_\_\_

I would like the acknowledgement of this gift to be sent to the following person/s.

Include my name  Yes  No | Include gift amount  Yes  No

Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

### Gift Information

\_\_\_\_\_ A check, payable to **SAISD Foundation** is enclosed. Please return this form & payment to:  
**SAISD Foundation ■ 2411 San Pedro ■ San Antonio ■ Texas ■ 78212 ■ Fax (210) 228-3084**

\_\_\_\_\_ I have already made this donation online at SAISDFoundation.com

Name on Card: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Account Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Code: \_\_\_\_\_

Card Type: \_\_\_\_\_ Signature \_\_\_\_\_

One Time Gift OR  Recurring Gift to be made on \_\_\_\_\_ date annually.

This gift is fully tax deductible and a gift receipt will be sent to you for your records. SAISD Foundation is a public charity **Tax ID 74-2861587**. For questions contact [jgeelhoed@saisdfoundation.com](mailto:jgeelhoed@saisdfoundation.com) or (210) 554-2235.