



Donor Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Province/Zip/Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_

(a tax-deductible receipt will be emailed if donation is more than \$20)

Method of Payment:

*Check or money order (payable to Learning Forward Foundation)*

Credit Card: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ 3-digit security code: \_\_\_\_\_

Please accept my donation of \$ \_\_\_\_\_

I would like to apply this donation to the following fund (optional):

General Scholarship & Grant Fund \_\_\_\_\_ Academy Scholarship Fund \_\_\_\_\_ Dale Hair Affiliate Development Grant \_\_\_\_\_

Gift of Success Campaign \_\_\_\_\_ Stephanie Hirsh Academy Scholarship \_\_\_\_\_

Dedicate my donation in honor or in memory of someone.

In honor of

In memory of

Honoree Name: \_\_\_\_\_

**Person to Notify**

Recipient Name: \_\_\_\_\_

Recipient Email: \_\_\_\_\_

Message: \_\_\_\_\_

\_\_\_\_\_

**Thank you for your donation**

Please send to: Learning Forward Foundation • 504 S Locust St. • Oxford, OH 45056  
P: (800) 727-7288 E: foundation@learningforward.org F: 513-523-0638