

ANNUAL FUND



Imani Christian Academy

Our Annual Fund supports the operations
and program for our school.

☐ **GIFT** I/We would like to make a gift to Imani Christian Academy in the amount of \$ _____

☐ Enclosed is a check made payable to Imani Christian Academy

☐ Please charge my gift to : AMEX MC VISA DISCOVER (circle one)

Card Number: _____ exp. Date ____/____ CV. _____

Name: _____ Signature: _____

☐ **PLEDGE** I/We prefer to make a pledge of \$ _____ (pledges must be paid by June 30)

☐ **MATCHING GIFTS** My/Our gift will be matched by the following company:

TO MAKE YOUR GIFT ONLINE PLEASE VISIT WWW.IMANIPGH.ORG/GIVEONLINE

DONOR INFORMATION (please print)

Name(s) _____

Address _____

City _____

This is my ☐ Preferred Address ☐ A New Address ☐ Seasonal (From _____ To _____)

Company _____

Phone (H) _____ (W) _____ (M) _____

Email Address _____

Please make my gift ☐ in honor of _____ ☐ in memory of _____

☐ Please Check if you wish to remain anonymous



THE SAINTS DONOR CIRCLE

- | | |
|-------------------------------------|------------------------------|
| <input type="checkbox"/> Supporter | \$5 - \$99 |
| <input type="checkbox"/> Donor | \$100 - \$249 |
| <input type="checkbox"/> Friend | \$250 - \$499 |
| <input type="checkbox"/> Patron | \$500 - \$999 |
| <input type="checkbox"/> Leader | \$1,000 - \$2,499 |
| <input type="checkbox"/> Visionary | \$2,500 - \$4,999 |
| <input type="checkbox"/> Benefactor | \$5,000 - \$7,499 |
| <input type="checkbox"/> Champion | \$7,500 (one year's tuition) |

Please allocate my gift to: _____

QUESTIONS?

Please contact the Director of Development
Lonnie Silver at 412-342-4431 or silver@imanipgh.org