



EPISCOPAL
DAY SCHOOL

Annual Fund Donation Form

Name: _____
(as you wish it to appear in the Annual Report)

Maiden Name, if Alumna: _____

Address: _____ Zip: _____

Phone: _____ E-mail: _____

Check Enclosed: \$ _____

Pledge \$ _____ (Please complete by June 30, 2011)

Charge Your Gift

Please circle: Master Card Visa

\$ _____ One Payment \$ _____ per month, circle: 1st or 15th

Card number: _____ Expiration: _____

Name on card: _____ Signature: _____

For questions or additional information, please call the Development Office, (904) 388-2632 x26.

DOUBLE YOUR GIFT!

My company, _____, will match with an additional \$ _____

- I/We would like to make a gift of appreciated securities.
- I/We have included St. Mark's Episcopal Day School in my/our estate plans.
- I/We wish to confidentially discuss a Planned Gift.

Tribute in memory/honor of _____ to the Annual Fund.

GIFT LEVELS

Winged Lion Society (\$1,000 and above)

Lion's Pride: \$10,000 and above	Patron: \$500 – 999
Founder: \$7,500 – 9,999	Friend: \$250 – 499
Leadership: \$5,000 – 7,499	Associate: \$1 - 249
Cornerstone: \$2,500 – 4,900	
Benefactor: \$1,000 – 2,400	