CBBA FANS

Financial Assistance for Needy Students

Donor	Name:				_
Street	Addres	ss:			_
City/S	tate/Zi	p:			_
Phone	No.				_
I woul	d like t	0:			
		Make a Donation to	o the Scholarsh	ip Fund	
		Target My Donation to a Specific Band Member			
	Band Member Name:				
		Be Acknowledged in the Newsletter/Website			
		Remain Anonymous			
Donat	ion/Ple	dge Amount:			
		Check Enclosed			
		Charge	Card #		
		□Visa	Exp Date:		
		☐ Mastercard	Signature:		
Pledge		e charge my Credit (Card or Invoice	me as follows:	
Date June 1, 2020			December 1, 2020		
July 1, 2020			January 1, 2021	_	
August 1, 2020			February 1, 2021		
September 1, 2020				March 1, 2021	
	October 1, 2020			April 1, 2021	
	November 1, 2020			May 1, 2021	

All Non-Targeted Donations to the CBBA FANS Fund are Tax Deductible