

LBBA FANS
Financial Assistance for Needy Students

Donor Name: _____

Street Address: _____

City/State/Zip: _____

Phone # : _____

I would like to:

Make a Donation to the Scholarship Fund

Target My Donation to a Specific Band Member

Band Member Name: _____

Be Acknowledged in the Newsletter/Website

Remain Anonymous

Donation/Pledge Amount: _____

Check Enclosed

Charge Card #: _____

Visa Exp Date: _____

Mastercard Signature: _____

Pledge: Please charge my Credit Card or Invoice me as follows

Date	_____
November 1, 2010	_____
December 1, 2010	_____
January 1, 2011	_____
February 1, 2011	_____
March 1 2011	_____
April 1, 2011	_____
May 1, 2011	_____
June 1, 2011	_____

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