

 **ARISTOI** CLASSICAL ACADEMY **Donation Form**

Company name/donor: \_\_\_\_\_

Primary contact: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

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

**Donation Type:**  Cash  Check (payable to Aristoi Classical Academy)  Credit Card  In-Kind

In-Kind Description: \_\_\_\_\_

Donation made in honor of: \_\_\_\_\_

Donation made in memory of: \_\_\_\_\_

My gift should be credited to the:  Year End Appeal  Topgolf Chip & Sip  Other

Donation Amount/Fair Market Value: \_\_\_\_\_

My donation is eligible for a match by my company: \_\_\_\_\_

List my generous donation as from: \_\_\_\_\_

Please keep my donation confidential

**Credit card donation information:**  Visa  MasterCard  American Express  Discover

Name as it appears on card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV: \_\_\_\_\_

\_\_\_\_\_  
Signature (required for credit card donations)

**For Office Use Only**

Donation Received by: \_\_\_\_\_

Donation Received on (date): \_\_\_\_\_

**Please mail or email form to:**  
Aristoi Classical Academy • 5610 Morton Road • Katy, TX 77493  
businessoffice@aristoiclassical.org  
**Donate directly online • [aristoiclassical.org/give/](http://aristoiclassical.org/give/)**