



# EVERETT PUBLIC SCHOOLS FOUNDATION

**Yes! I want to be a *Foundation* Partner and help our students, staff and community succeed.**

Company name: \_\_\_\_\_ Contact name: \_\_\_\_\_

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact name e-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

**Please Select Partner Level**

- ACHIEVE**      \$15,000 +
- IMPACT**      \$10,000 to \$14,999
- EMPOWER**    \$5,000 to \$9,999
- INSPIRE**      \$2,500 to \$4,999
- ELEVATE**      \$1,250 to \$2,499
- ENGAGE**      \$500 to \$1,249

**Please Indicate Gift Amount & Payment Option**

I would like to make a one- time gift amount of \$ \_\_\_\_\_

**OR**

I would like to make payments

Annually    Quarterly    Monthly  
in the amount of \$ \_\_\_\_\_

To pay online, please visit our website at [www.epsfoundation.org](http://www.epsfoundation.org) and select Annual Business Partnerships on the left side of the page.

**Please print your company name as you would like it to appear in our marketing materials.**

\_\_\_\_\_

Please make checks payable to EPSF and mail to: P.O. Box 3112, Everett, WA 98213

Charge my  Visa     Master Card    American Express    Discover

Credit Card # \_\_\_\_\_

Signature: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

*Thank you!*

P.O. Box 3112 ~ Everett, WA 98213 ~ 425.385.4695 ~ Email: [khansen@everettsd.org](mailto:khansen@everettsd.org)