

Family Giving Campaign Donation Form

l. Donor name/s:		Today's date:		
Address:	City:	State:	ZIP:	
Phone Number: Email Address:				
2. Tell us the names of your children	:			
1	Grade:	Teacher:		
2.	Grade:	Teacher:		
3.	Grade:	Teacher:		
3. Suggested Family Donation is \$150	00-2000. However, git	fts of ALL sizes are needed	!!	
\$				
1. Payment: Please select one payme	nt option:			
□ One time payment				
□ monthly installment p	ayments of \$	per month for a to	tal donation of \$	
5. Method of Payment: Choose metho	od of payment.			
□ CHECK	□ CASH			
Make check payable to City Language	Immersion Charter	(please enclose with this form	ı). You can also pay	
online by going to https://clic.citycharte	rschools.org/family-givi	ng-campaign	,	
f you need assistance, contact: porella	ana@newlosangeles.org	9		
5. Matching Gift Programs: Ask your e	employer about matchii	ng gift programs that can dou	ble your family's contribution.	
☐ Yes, my employer provides match	ning non-profit contribu	tions. Employer:		

7. **Delivery Method:** You can deliver the form to the donation box on campus office or mail it to:

CLIC Attn: Family Giving Campaign 4001 Venice Blvd Los Angeles CA 90019