



## Lancaster Scholarship Foundation, Inc. Donation Form



I want to support the Lancaster Scholarship Foundation, Inc. at the following level:

\_\_\_\_\_ \$20 Individual membership

\_\_\_\_\_ \$30 Family Membership

\_\_\_\_\_ \$50

\_\_\_\_\_ \$100

\_\_\_\_\_ \$150

\_\_\_\_\_ \$200

\$\_\_\_\_\_ Other

In Honor / Memory of (circle one) \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City / State \_\_\_\_\_

Email Address \_\_\_\_\_

Telephone \_\_\_\_\_

Please mail form and donation to:  
Lancaster Scholarship Fund, Inc.  
P.O. Box 333  
Lancaster WI 53813

*Thank you for your gift and investment in our children's future!*