



Classroom Partner Membership Form 2018-2019



Blossom Montessori School for the Deaf would like to take the opportunity to thank you for your interest in becoming a Classroom Partner. To adopt one or more classrooms, please fill out the form below and enclose with your tax deductible donation of \$180 (one hundred & eighty dollars) or the selected level you choose. You can sponsor a class independently or share it with others (family, friends, neighbors, religious affiliations, etc). The entire donation will be used to help with those little extras that are so needed to help out students in their education. Please note that 100% of your Classroom Partner donation will be used by your adopted classroom(s). All funds will be used to purchase classroom materials, supplies or equipment. To make a difference please follow the steps below:

1. Choose a donation level- you may choose to adopt one or more classrooms (check one):

- _____ Adopt 1 Classroom: Donation of \$180
- _____ Adopt 2 Classrooms: Donation of \$360
- _____ Adopt 3 Classrooms: Donation of \$540
- _____ Adopt 4 Classrooms: Donation of \$720
- _____ Other Donation Amount of \$_____

2. Choose the classroom(s) that you would like to adopt (check one):

- _____ 3-6 Classroom
- _____ 6-9 Classroom
- _____ 9-12 Classroom
- _____ Life Skills Classroom
- _____ Art Class
- _____ Physical Education (P.E.) Class
- _____ Please use my donation to help any Classroom that needs my help! ☺

3. Fill out the information below:

*Name(s) of who we are to thank: _____

(This can be the family name, business name, or group name that will appear on the classroom partner certificate and thank you response.)

*Name(s) of who the receipt should be made out to: _____
(If name is different than whom we are to thank.)

*Mailing Address: _____
(To mail tax deductible "Thank You" letter & classroom updates.)

*Contact Phone Number: (_____) _____ - _____
(For any questions.)

*E-mail Address: _____
(So we can notify you of future events & include you on our e-newsletter mailing.)

4. Make your check payable to: Blossom Montessori

- Or pay via credit card on-line at www.blossomschool.org (just be sure to enter "Classroom Partners Donation" & the "Classroom Name" that you would like to adopt in the Comments section).
- Or pay via credit card by calling Blossom's Business Manager, Tara Bonano, at (727) 539-7879.

5. Return your completed Classroom Partner Membership form with your check to:

Blossom Montessori School for the Deaf - Classroom Partners
 14088 Icot Boulevard, Clearwater, Florida 33760

 **The Students, Parents & Staff at Blossom thank you for supporting our school!** 