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| **NSAF 2025 Honor Roll Donor Card**Thank you for supporting our Newington students!Please complete the information below. Enclosed is my check for $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name | * $25 to $49
 | * $250 to $499
 |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address | * $50 to $99
 | * $500 and above
 |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City | * $100 to $249
 |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State Zip Code***Donations are accepted year-round.*** ***Please make your check payable to NSAF*** | * I have enclosed a matching gift form from my employer.

*Mail this completed form to:***Newington Student Assistance Fund**PO Box 310216Newington, CT. 06131 |

**Newington Student Assistance Fund, Inc.**