



Slide to the Finish Fundraiser

Student Name: _____

Email address: _____

Donator Name: _____

OR

Donate Anonymously Y/N: _____

Donation Made in Honor of (former teacher/student):

Address: _____

City: _____ State: _____ Zip Code: _____

Amount Enclosed: _____

Corporate Match Y/N: _____ If Y, please note company: _____

*(*This form is only used for Cash or Checks donation. Please make check payable to "Apollo PTA"*

***All Cash and checks can be mailed to Apollo Elementary School, ATTN: Apollo PTA, 15025 SE 117th St, Renton, WA 98059*

****Apollo PTA is a 501c3 organization with the federal tax ID 91-1087334.)*