



HELP MAKE THE CONNECTION FOR OUR STUDENTS BY JOINING US TODAY!

WCAEF Pledge Form

Please make your check payable to **WCAEF** and mail to:
WCAEF 782 Springdale Drive, Exton, PA 19341

NAME: _____

COMPANY: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

WCASD alumnus/graduation year: _____

High School: _____

- Our company will designate the Foundation for EITC funding.
- I am able to provide an internship for a student.
- I am interested in serving on the Foundation Board.
- I am willing to work with a co-op student.
- I am interested in volunteering time.

ENCLOSED IS MY GIFT OF: _____

Please designate my gift as follows:

In memory of _____

In honor of _____

In appreciation of _____

In recognizing this gift, the contributor may be acknowledged in a number of ways, including but not limited to, having the contributor's name appear in print. If you do not wish for your name to be published for public view, please initial here. ____

The Foundation is a non-profit charitable organization qualified as an organization exempt from Federal income tax under Section 501(c)(3) of the Internal Revenue Code.