



Hardee Athletic Foundation Donation Form 2019

Information

Name: _____
Phone Number: _____ Email Address: _____
Billing Address: _____
City/State/Zip: _____

Areas to support:

Supplemental Funding

This fund supports athletes endeavors to showcase their talent and be recognized by college coaches (camps, showcases, all-star classics, etc.)

Scholarships

This fund awards senior athletes of Hardee Senior High college scholarships (amounts vary based on funding available)

Academic Support / Financial Testing

This fund financially assists Hardee Athletes with test fees, test prep fees, clearing house

Athletic Community Projects

This fund supports Hall of Fame Dinner and projects

Please designate (if you choose to) which fund you would like to support monthly....

I authorize Hardee Athletic Foundation to charge my credit card \$ _____ each month to support _____ until I inform the Foundation otherwise.

Please charge: \$ _____ to my Visa Master Card American Express Discover Card
Account # _____ CVV code: _____ Exp. Date _____

Please designate (if you choose to) which fund you would like to support with a one-time contribution....

One-Time Payment Options:

- Cash Enclosed
- Check Enclosed (Made payable to Hardee Athletic Foundation) Mail to P. O. Box 1743 Wauchula, Florida 33873
- Credit Card

I authorize Hardee Athletic Foundation to charge my credit card a one-time contribution of \$ _____ to support _____

Please charge: \$ _____ to my Visa Master Card American Express Discover Card
Account # _____ CVV code: _____ Exp. Date _____

Donor Recognition _____ I wish to remain anonymous

Donor Signature (Required for Processing) I understand that my gift will be processed according to my wishes. I am making this donation as a charitable contribution and am not receiving any goods or services in return. This is a tax-deductible gift.

Donor Signature

Date

Contact HAF at 863-781-0358, hardeethleticfoundation@gmail.com or www.haf-online.org