

HIGHLANDS COMMUNITY EDUCATION FOUNDATION

Proud to Be PUBLIC EDUCATION.

PO Box 288, Natrona Heights, PA 15065 724-226-2400

The purpose of the **Highlands Community Education Foundation** is to help finance projects that cannot fully be supported through the districts budgetary allotments. The projects selected are those that aim to provide educational, recreational, and cultural benefits to students and residents of the Highlands School District. HCEF is non-profit, 501c3 organization. Donations are tax-deductible.

The foundation aims to establish a partnership with school, community, business and industry, something that's become a necessity due to today's economic and social demands. The goal is to help produce trained educated young people who are adequately prepared to enter the work world and become assets to their employers and the community.

Past contributions include \$2,100 for broadcasting equipment, \$7,000 to help install lights at the varsity baseball field, \$6,000 to help restore the districts tennis courts \$4,000 for new crossing lights near the middle school on Freeport Road, and \$3,000 to help pay for calculators being used in High School Math Classes. To make a donation to HCEF to support projects such as these or to earmark funds for any other department, please complete and submit the form below.

This year, Highlands School District competes more than ever against highly visible and advertised cyber and charter schools. Highlands hopes to tout its academic achievements and outstanding community through a public awareness campaign. If you would like to donate to HCEF and have funds earmarked for the public awareness campaign, mark the appropriate box below. Thank you for helping us highlight our community and district!

Donation Form

I am enclosing a donation of:	Please mark my donation for:
Please ONLY send check donations. No cash. Receipt will be mailed to you. 25.00 50.00 100.00 250.00 500.00 Other	☐ General Fund
Contributor Information (please print)	☐ Public Awareness Campaign
Name	□ Department
Address	□Classroom
PhoneEmail	□School
☐ I would like my donation to be anonymous.	

☐ I would like to give regularly. Please send an envelope each semester for my contribution at the rate checked above.

Please return this form with your check to: