



Honor an Educator

Name: _____

Address: _____

Email: _____

Name of Person to be honored: _____

Name of child that was impacted (optional): _____

School Name of Honoree:

- | | |
|--|---|
| <input type="checkbox"/> Allen Creek Elementary | <input type="checkbox"/> Barker Road Middle School |
| <input type="checkbox"/> Jefferson Road Elementary | <input type="checkbox"/> Calkins Road Middle School |
| <input type="checkbox"/> Mendon Center Elementary | <input type="checkbox"/> Mendon High School |
| <input type="checkbox"/> Park Road Elementary | <input type="checkbox"/> Sutherland High School |
| <input type="checkbox"/> Thornell Road Elementary | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> District Office | |

How is this educator keeping education extraordinary?

Would you like the above read to the honoree or kept private:

- Read to them* Keep Private

**If you would prefer, you could drop off a personal card at the main office of the school.*

Amount of donation: _____

(\$25.00 minimum donation)

Mail completed form and check payable to KEEP Foundation to:

KEEP Foundation, P.O. Box 243 Pittsford, N.Y. 14534-0243

For questions, please contact Jeanne Strazzabosco jeannestrazzabosco@gmail.com