



HTCS Annual Fund Campaign

I will support the mission of Holy Trinity Catholic School by joining the **LEADERS CIRCLE**. I will make an annual gift -- *every year for five years* -- in the following amount:

☐ \$25 ☐ \$50 ☐ \$75 ☐ \$100 ☐ \$150
☐ \$200 ☐ \$350 ☐ \$500 ☐ Other: _____

Please direct my contribution in the following manner:

☐ Unrestricted / Area of Greatest Need
☐ Technology ☐ Curriculum ☐ Religious Ministry

Please make checks payable to Holy Trinity Catholic School.

Give ONLINE at www.htcs.org/giving

Name _____

Address _____

Phone _____

Email _____

☐ I would like my donation to remain anonymous.

☐ My employer, _____, will match my contributions.

Check **ALL** applicable boxes regarding your connection to HTCS:

<input type="checkbox"/> Current HTCS Parent	<input type="checkbox"/> Holy Trinity Parishioner
<input type="checkbox"/> Current HTCS Grandparent	<input type="checkbox"/> St. Stephen Parishioner
<input type="checkbox"/> Past HTCS Parent	<input type="checkbox"/> HTCS Faculty & Staff
<input type="checkbox"/> Past HTCS Grandparent	<input type="checkbox"/> Past Faculty & Staff
<input type="checkbox"/> Friend	<input type="checkbox"/> Other _____

Alumni with Grad Year:

<input type="checkbox"/> HTCS _____
<input type="checkbox"/> St. Albert the Great _____
<input type="checkbox"/> St. Stephen _____
<input type="checkbox"/> Our Lady of Assumption _____
<input type="checkbox"/> St. Elizabeth Ann Seton _____

By joining the **LEADERS CIRCLE**, I pledge to make annual gifts in the same amount or greater than this donation for the next five years.

Signature _____

☐ This is a one-time donation.