

The Village Charter School
A Whole World Multicultural Curriculum
4614 Old Redwood Highway, Santa Rosa, CA 95403
(707) 591-9262 Fax (707) 591-9275

Parent Giving Program (PGP)

Parent/Guardian First and Last Name: _____

Students Last Name: _____

First Name(s) and Grade(s): _____

Email Address: _____

Home Address: _____

PGP is an integral part of the VCS's annual budget as the income from the state is not enough to cover our expenses. All contributions are greatly appreciated and critical in maintaining our school health. PGP monies are used for enrichment programs, staff support, festivals, office supplies and bathroom cleaning. It is our goal that each family contributes \$1000 per year (\$100/month).

For each child enrolled, we/I will give a per month commitment of (*circle one*):

\$300 \$200 \$175 \$125 \$75 other \$ _____

Pledged amount per child (multiply above amount by 10/pmts) \$ _____ x # of children _____ = \$ _____
Total for the Year

The first statement will be sent out in August 2010 with the full amount billed to your account. Each month's statement thereafter will be a reminder to pay 1/10 of your gift and will show each payment received. The last payment is due in June 2011.

We/I (the parents/guardians) voluntarily agree to participate in the Parent Giving Program (PGP) and understand that our promised contribution will be in effect for the 2010/2011 school year or until our child(ren) leave the school.

We/I understand that the acceptance or enrollment status of our child(ren) at VCS will not be affected by our participation in the Parent Giving Program.

We/I understand that donations are non-refundable; however, they are tax-deductible and we/I will receive a statement at the end of each calendar year in which donations are made.

Please complete, sign and return this form to the office. If we do not receive a form from you, you will be contacted directly.

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date

Thank You!
PGP Committee