

# Charting The Course



The City of Pembroke Pines School System

### **SUPPORT OUR SCHOOLS**

### City of Pembroke Pines Charter Schools Foundation 2025-26 Pledge Form

(Please Print) Parent Name(s):	
Campus(es):	Grade(s): Teacher(s):
Telephone: (Home)	(Cell)
Best time to call:	Email(s):
Mailing Address:	
Annual Pledge Amount*:  *Not applicable to the FSU Activity	(\$250 per household recommended/not required)
•	nent (Please check an option below): at: <a href="https://www.ppcsf.org">www.ppcsf.org</a> (PayPal Donate Button on 'Giving' Tab).
Mobile Paymer	Scan this QR Code from your mobile device to donate through PayPal. A PayPal account is not required to make a donation - all major credit and debit cards are accepted.
<ul><li>Cash/check *_</li><li>Employer Mate</li></ul>	ching Gift (See Third Page): Name of Employer:
• Please of	ard: One Time Payment(or) Recurring Payments (\$/month) complete CC Authorization form (See Second Page For More Details): ss Sponsorship (See Third Page for More Details): Ex: \$400 per banner location.
Sponsor	ship name:
	ce sure student's name and campus location is included in your correspondence.
Make Checks Payable To:	Pembroke Pines Charter School Foundation, Inc. Attn: Jonathan Bonilla 8300 S Palm Drive Pembroke Pines, FL 33025 Phone: 954-518-9030 Fax: 954-518-8902
Parent Signature:	Date:
For administrative use only Received by: Co	r: ntacted by/date: Payment received/scheduled: FY:
A COPY OF THE OFFICIAL REGISTRATI	ON AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL FREE

(800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.



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#### **Credit Card Payment Authorization Form**

#### Please complete all the information below:

I authorize Pember (Full name)	roke Pines Charter Schools Foundation, Inc. to		
charge my credit card account indicated below for			
This payment is for(Description of goods/ser	vices)		
Billing Address	Phone#		
City, State, Zip	Email		
Account Type: Uisa MasterCard	☐ AMEX ☐ Discover		
Cardholder Name			
Account Number			
Expiration Date			
CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX)			
SIGNATURE	DATE		

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.



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#### **The Employer Matching Gift Option:**

Matching gift programs are offered by companies across the world. In fact, about 65% of Fortune 500 companies (and many others) match employee donations. We encourage our PPCS parents to inquire with their employers on whether they can match your Parent SOS PPCS Donation. All of your employer matching gift donations will be credited toward your child's SOS PPCS pledge amount. The PPCS Foundation Tax ID Number and Non-Profit 501(c) 3 Registration Number is provided on the bottom of your pledge form for employers that may need it in order to process a matching gift for your family.



#### **Top 10 Matching Gift Employers**

- General Electric
- 2. Soros Fund Management
- 3. BP
- 4. Gap
- 5. State Street
- 6. Exxon Mobil
- 7. Car Max
- 8. Johnson & Johnson
- 9. Boeing
- 10. Microsoft

#### **Business Sponsorship Option:**

The SOS committee recognizes the financial burden that donation pledges place on some of our families. In lieu of the traditional pledge payments such as cash and credit, parents have the option to reach out to our business community and seek sponsorships in which businesses can purchase banner (3'x5') advertising space to be placed at a preferred school location for \$400 and receive recognition as a corporate partner on the PPCS Foundation website (www.ppcsf.org).

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