

Giving Form

Contact Info	rmation			
Name:				
Address:				E RILAND
City/State/Zip Code:				High School Broad Street Presbyterian Church Heartland High School 760 East Broad Street Columbus, OH 43205
Email:				
Gift My gift of \$ is enclosed.				
Checks payable/ mail to: Heartland High School				
Bill me (circle o	one of the below):			
Monthly	Quarterly	Semi-Quarterly	Annually	
Begin payment	ts on:			
Signature:				
Date:				
For convenience	ce, we accept: Visa	Master Card Discover	American Express	
Card Number: Expiration Da			e:	
CWR Code: Notes:				
Additional In	nformation			
Notes:				
My employer v	will match this gift:	Yes No		

Broad Street Presbyterian, Attn: Heartland High School, 760 East Broad Street, Columbus, Ohio 43205 info@heartlandhighschool.org