

## **JOHN READ MIDDLE SCHOOL PTA DONATION FORM**

Please fill out all information below:

Donor Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Student(s) Name(s): \_\_\_\_\_

I am enclosing check # \_\_\_\_\_ payable to "JRMS PTA" in the amount of  
\$ \_\_\_\_\_

Please mail this form with your donation to:

**JRMS PTA**

C/o John Read Middle School

486 Redding Rd.

Redding, CT 06896

The JRMS PTA is a registered 501(c)3 organization. A receipt for your records will be mailed to you.