

Donation Form

The After-School Corporation
1440 Broadway, 16th Floor
New York, NY 10018
Fax: (646) 943-8800
Attention: Jama Toung, Director of Development

I would like to make a contribution to The After-School Corporation (TASC).

Please accept my gift of \$ _____.

Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Email: _____

Phone: _____ Fax: _____

**If your employer has a matching gift program, please enclose your application.*

_____ I am enclosing a check payable to **The After-School Corporation**.

_____ Please charge the contribution to my credit card:

VISA MC AMEX DISCOVER

Card number: _____

Expiration date: _____

Security code: _____

Name as it appears on card: _____

I would like to make my donation in honor of someone special. Please notify the person listed below:

Name: _____

Occasion: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Email: _____

Phone: _____ Fax: _____

The After-School Corporation is a nonprofit 501 (c) (3) organization. Your gift is tax-deductible.

We thank you for your support!