



Community Order Form

Donor Information (please print or type)

Name	
Address	
Telephone	
E-Mail	

ONLY ONE HONOREE PER FORM. MINIMUM \$10 DONATION REQUIRED.

Honoree Information

Name	
Address	
Phone Number	

Payment Information

I (we) would like to make a one-time donation to the Terrell ISD Excellence Foundation for \$_____ in honor of the person designated above.

I (we) plan to make this contribution in the form of: check (included) credit card (see below)

Credit card type	
Credit card number	
Expiration date	
Authorized signature	



For more information please contact one of the following:

Tori Lucas at torilucas@anbx.com or (214) 863-6068

Dana Skelton at dana.skelton@terrellisd.org or (972) 563-7504