

Please support the *Reaching New Heights* Spring Challenge

Name _____

☐ I would like my gift to remain anonymous.

Address _____

City _____

State _____ Zip _____

Telephone _____

Email _____

**YOUR GIFT OF GOODNESS CAN HELP
MEET THE CHALLENGE**

☐ Enclosed is my tax deductible gift of \$ _____
to the Holy Family Fund Spring Challenge.

☐ I/We pledge a gift of \$ _____ with a balance
to be fulfilled by June 30th, 2022.

☐ My company has a matching gift program.

Please make checks payable to **Holy Family Regional
Catholic School** and return in enclosed envelope.

THANK YOU FOR SUPPORTING OUR SPRING CHALLENGE!

HFRCS