

**San Mateo-Foster City School District
Middle School Afterschool Athletics Program**

Congratulations on being a student athlete in the Middle School Afterschool Athletic Program! Student athletes have the opportunity to make friends, learn positive sportsmanship and gain athletic skills that benefit them throughout their lives. All of the middle school athletic programs have a high participation rate and we encourage every student to consider joining a team.

As you may or may not be aware, the Middle School Afterschool Athletic Program is made possible through donations. The San Mateo-Foster City Education Foundation (SMFCEF) has generously supported the program through fundraising events but the main funding comes from donations made by families for their student to participate in a sport each season. Donations cover program costs including field reservations, coaches, referees, uniforms and equipment.

In order to offer a high quality athletic program, we need support from every family of a student who participates in the afterschool athletics program. We are requesting a voluntary donation in the amount of \$150.00 per athlete per sport. Please know that a donation in any amount will help the District continue to provide a high quality afterschool athletic program for students. However also be reminded that a donation is not required for a student to participate in the afterschool athletics program.

There are other ways you can support the program by sponsoring another student, volunteering at fundraisers or find a business sponsor. Together we can make sure that middle schools can continue to offer athletic opportunities to our students. If you are interested in volunteering, please contact your school's Site Athletic Director or Cheryl Remedios, District Athletic Director at cremedios@smfcsd.net. Thank you in advance for your support!

Every student athlete is required to return the form below. Please print legibly when completing the form.

Student's Name: _____ Grade: _____

Team (example: Girls Volleyball 6A): _____ School _____

Donation Amount: Cash \$ _____ Check \$ _____ Online: \$ _____

Credit Card (see below) \$ _____ Square \$ _____

I would like to sponsor another student athlete. \$ _____ Total \$ _____

My employer will/may match my donation. Employer's name: _____

IMPORTANT: A receipt will be sent to the contact information you provide below.

Donor's Name (First and Last): _____

Email: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Credit Card # _____ Exp. Date: _____ CVC #: _____ (3-digit code on back of card)

One-time payment: \$ _____ or \$ _____ per month until the total equals \$ _____

Billing address: _____

Name on Card: _____ Signature: _____

The SMFCEF is a 501 (c) 3 non-profit organization. Donations are tax-deductible. Tax ID 94-3110731. Questions? Please contact the SMFC Education Foundation, 1170 Chess Drive, Foster City, CA 94404 Email: smfcedfund@smfcsd.net Phone: 650-312-7235 Website: www.smfcedfund.org