

Jackson County Turf Project

Donation Form

Yes, I/we want to support the improvement of athletic facilities at **BCHS****.

Enclosed is my payment of \$_____. *

We realize this gift* will be recognized in a prominent place at the high school or at Blevins Memorial Stadium.

Name(s) as you wish it to appear — *Gifts in memory of individuals or families may be made. (Please print clearly)*

or

I/We wish this gift to remain anonymous.

*Checks should be made out to:

**Community Foundation of Jackson Co.
P. O. Box 1231
Seymour, IN 47274**

**Please note "Jackson County Turf Project" on memo
line of check.**

Contact Information:

Name: _____

Address: _____

Telephone: _____

E-mail: _____

Signature: _____

**** Contributions to this project are tax deductible.**

For more information or if you are interested in volunteering to help with this project in any way, contact the Brownstown Central Football Offices at 812-358-4814.