

MONTERA ANNUAL FUND

MONTERA PARENT-TEACHER ORGANIZATION

We need you. Our goal is to raise \$50,000 this year. Montera Middle School depends on private donations from parents, businesses and the community to fund many things that aren't covered by the school budget - both essential needs and the extras that enrich students' lives. **The Montera Parent-Teacher Organization (PTO)** is a group of volunteer Montera parents who work closely with the principal, teachers, after-school program coordinators, coaches and school staff. We raise funds and volunteer our time to help implement many programs to enrich our students' lives. Join us!



YOUR DONATIONS:

- Fund field trips to plays and museums
- Give each teacher \$300 worth of classroom supplies
- Pay for first aid training for staff and emergency supplies for the school
- Provide mini-grants to teachers for things like software, books and art materials
- Purchase new books for our school library
- Fund afterschool enrichment programs, music and sports
- Provide scholarships for students in need to participate in fee-based programs

\$300

Any amount helps. Our target is \$300 per family, but we understand not everyone can give that much. No amount is too small to make a difference: Your \$300 donation sends 37 8th graders to see a play. A \$200 donation buys a new Chromebook for a classroom.

A \$100 donation gets five new soccer balls for our afterschool teams. Even \$5 buys two planners, which all students receive at the beginning of the year to help them stay organized.

2 EASY WAYS TO DONATE



1. Online. Go to www.monteramiddleschool.org and click "Support Us"



2. On paper. Return this form to the school by mail or drop it off in the office:

Yes, I want to make a tax-deductible donation to the Montera PTO Annual Fund!



Donation Amount: \$ _____ NAME(S): _____

PHONE: _____ EMAIL: _____

Check enclosed payable to Montera PTO (write "AGD" in the memo field)

Bill my credit card a one-time transaction

Bill my credit card in _____ monthly installments of \$ _____ each

Card #: _____ Expiration: ____/____ CVV: _____ Billing Zip: _____

YES! My employer offers a Corporate Matching Gift Program. Please send me a duplicate receipt. Employer Name: _____