

Name of Sponsor _____
Address: _____
City: _____ Zip: _____
Phone: _____

Sponsorship Option

- Cash
 Check

I have decided to sponsor a student through the Education Angel Program..... 2020/21 OR 2021/22

- Archangel Sponsor**– Full Tuition (*balance of a student's tuition if the school year has already started*)
 Guardian Angel– Partial (*payment towards a student's tuition balance if the school year has already started*)
 Cherub Sponsor– tuition assistance general donation

Please circle which grade level you are sponsoring

Three-year-old Preschool– Full Day

Three-year-old Preschool– Half Day

4K– 8th

Total Sponsorship \$ _____	Enclosed Amount \$ _____	Please see letter for program details 124 E. Center St. ~ Shawano, WI 54166
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I would like to know the first name and grade of the child that I am sponsoring so that I can also pray for them.

YES

No

Would you like us to share your name with the recipient's family and in our sponsorship materials or wish to remain anonymous?

Share my name

Anonymous



I would like to know the first name and grade of the child that I am sponsoring so that I can also pray for them.

YES

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