

TOSCA Membership

I/we would like to join The Orestimba Scholarship Community Association on the following level.

Check one please:

Endowment gift:

TOSCA Membership

The amount indicated at left is given in memory/honor of:

\$_____ \$5,000 Honorary Degree Level

_____ \$15 Individual

_____ \$25 Family

\$_____ \$10,000 Associate Degree Level

_____ \$50 Sustaining

_____ \$100 Sponsor

\$_____ \$15,000 Bachelors Degree Level

_____ \$250 Bronze

_____ \$500 Silver

\$_____ \$20,000 Masters Degree Level

_____ \$1000 Gold

_____ \$_____

\$_____ \$25,000 (or more) Doctorate Level

Other

Benefactor/Memorial Gifts (over)

Please complete information on reverse

_____ Please contact me. I need more information.

Name _____

Business/Organization _____

Address _____ City/St./Zip _____

Phone (_____) _____

TOSCA is a 501c3 non-profit corporation. All contributions are tax deductible.

Please make your checks payable to TOSCA and return this form to: TOSCA, P.O. Box 18, Newman, CA 95360.