



**HOUSTON ASSEMBLY OF DELPHIAN CHAPTERS
SCHOLARSHIP FOUNDATION FUND
HOUSTON, TEXAS
TAX EXEMPT #746107014 - 501 (C) (3)**

Date _____

DONATION CATEGORIES

Delphian Chapter

NAMED SCHOLARSHIPS

Four-Year Scholarship	\$16,000
One-Year Scholarship	\$ 4,000

Donor's Name (Please Print)

DONOR

One-Semester	\$ 2,000
Half-Semester	\$ 1,000
Scholarship Patron	\$ 100
Scholarship Friend	\$ 50

Street Address

City State Zip

In memory of _____

or

Phone

Honoring _____

Make check payable to:
HOUSTON ASSEMBLY OF DELPHIAN CHAPTERS
SCHOLARSHIP FOUNDATION FUND
OR **HADCSFF**

MAIL TO:
HADCSFF
Attn: Foundation Treasurer
P. O. Box 42401
Houston, Texas 77242
713 773-4380

Paid \$ _____ Check # _____ Date: _____

No goods or services were furnished in consideration of this gift

Authorized Signature (Delphian receiving)

Date

Donations will be gratefully accepted throughout the year. Gifts of \$50 or more will be listed in printed programs.