RIDGE ALUMNI MEMORIAL SCHOLARSHIP
DONATION FORM

☑ **I REMEMBER** Enclosed is my check for $_____

My Name: _____

Street: _____

City, State, Zip: _____

Email: _____

I am a:

- ☐ Ridge Parent
- ☐ Friend of Ridge
- ☐ Ridge Graduate, Class of _____

Here is my message for the Virtual Memorial, exactly as I want it to read:

_____

_____

_____

☐ **Ridge AMS may thank me publicly.** ☐ **I prefer to donate anonymously.**

I understand that I am providing my name and address strictly for Ridge AMS record keeping. My message will appear on the Virtual Memorial, but my name will appear with my message and on a list of donors only if I choose to be thanked publicly. My email address will be used solely for communication with Ridge AMS related to my donation.

Please make your check payable to "Ridge Alumni Memorial Scholarship."
Mail your donation and this completed form to:
Ridge AMS, 26 Chapin Lane, Far Hills, NJ 07931

Donations may be tax deductible under applicable law, IRS 501(c)(3)