**METHACTON SCHOOL DISTRICT GIFT REQUEST FORM**

All gift requests must be approved by the Building Principal, Superintendent, and Board of

School Directors. Gifts may be accepted only after all approvals have been received.

If the Donor desires to remain anonymous, place the word “anonymous” in the space reserved for “Name of Donor”

Name of School: Date:

Name of Donor:

Address of Donor:

Description of Gift:

Value of Gift:

Purpose of Gift:

Request is hereby made that the Methacton School District accept the gift described above.

Signature of Donor:

The gift described above is hereby accepted in the name of the Methacton School District.

Building Principal Date Superintendent Date

Board of School Directors, Secretary Date

NOTE: In unusual circumstances where installation costs of certain types of gifts would be of a substantial nature, it may be required by the District that the Donor be responsible for such costs.

cc: Building Principal

Superintendent

***(Revised 12/16)***