

\$1,000 SPONSORSHIP RECOGNITION WALL

**BE PART OF THE MHHS MODERNIZATION PROGRAM!
WITH A \$1,000 GIFT, YOUR NAME GOES ON THE WALL!**

Name: _____

Mailing Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Phone Number: _____ Cell Phone: _____

Email address: _____

Sponsorship Amount \$1,000 -- Name to appear on Sponsorship Wall (Please Print Clearly):

Graduation Year: _____

Signature: _____

Date: _____

- All donations will receive a tax receipt. All payments should be made payable to Medicine Hat School District No.76. To make financial arrangements, please contact:
accounting@sd76.ab.ca
(403-528-6714 or 403-528-6713)
- Payment plans may be arranged over multiple years.
- Medicine Hat High School has the right to refuse any sponsorship.
- Please complete this form and return to Medicine Hat High School c/o Boris Grisonich, Principal
403-527-3371 ext. 7126.



Medicine Hat High School
200 - 7 Street SW, Medicine Hat, AB, T1A 4K1