



Write It Out Journal Workshop Sponsored Scholarship Form

Donor's Full Name _____

Mailing Address _____

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	Program you wish to Sponsor	Date(s):	Fee	Sponsorship amount	Balance Due
	Workshop I		\$	\$	\$
	Workshop II		\$	\$	\$
	Workshop III		\$	\$	\$
	Ongoing group, 10 weeks		\$	\$	\$
	Theme wkshp:		\$	\$	\$
	Other		\$	\$	\$

AND/OR Sponsored Individual(s)

Full Name _____

Mailing Address _____

Phone number _____ Email Address _____

Sponsorship amount: \$ _____

Full Name _____

Mailing Address _____

Phone number _____ Email Address _____

Sponsorship amount: \$ _____ (Add additional names in the comments section, if necessary)

AND/OR General Donation to Journal Workshop Scholarship Fund: \$ _____

Please indicate how we may acknowledge your generosity:

Individual or Organization Name: _____

Notify scholarship recipient(s) only. Verbal announcement only. Anonymous.

Mail completed form and donation to:
StudioGraphia
 PO Box 40983 Tucson, AZ 85717
 Or email as attachment to: info@writeitoutjournal.com

Form of payment	Amount	For office use only
CHECK/MONEY ORDER #	\$	Date rec'd
Credit card via PayPal	\$	Receipt sent

THANK YOU FOR YOUR CONTRIBUTION!!!!

