



Donor(s) Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Child(ren)'s Name(s) & Grade(s): \_\_\_\_\_

Amount enclosed:

\$1200\*  
*\*full BTG per child amount*

\$750

\$500

\$ \_\_\_\_\_ (other)\*  
*\*please only give what  
you're comfortable with—  
every donation helps!*

**Please make checks payable to:** The Peck Slip School PTA; **Mailing Address:** Peck Slip PTA, Attention: Bridge the Gap, 1 Peck Slip, New York, NY 10038. *You may also send in a check in a sealed envelope in your child's folder or drop off at the BTG box in the security desk or PTA office.*

Credit card donations can be made at: <https://www.peckslipschoolpta.org/donate-bridge-the-gap.html>. You can pay in monthly or quarterly installments or make a one-time payment.

### [Doubling your Donation through Employer Matching!](#)

**Does your employer (or Co-Donor's employer) match donations made to nonprofit organizations?**

Yes  No  TBD\* (*\*we can help you with employer matching questions—please email [peckslipbridgethegap@gmail.com](mailto:peckslipbridgethegap@gmail.com)*)

Employer(s) Name if "Yes" or "TBD": \_\_\_\_\_

**Nonprofit Organizational Info for Employer Matching:**

- Name: Peck Slip School Parent Teachers Association Inc
- Address: 1 Peck Slip, New York, NY 10038
- Phone: (212) 312-6260
- Tax ID/EIN: 61-1694546
- Designation: Bridge the Gap

**THANK YOU!** Please check your email for a receipt. Email [peckslipbridgethegap@gmail.com](mailto:peckslipbridgethegap@gmail.com) with any questions.