

Check it out!

The Oklahoma School for the Deaf Foundation for Excellence in Education, Inc. provides a way for you to make a difference in the academic opportunities available to Deaf Students.

Foundation funds are given in the following two ways:

Foundation funds are awarded to projects that emphasize new approaches in teaching and for developing innovative programs which stimulate thought and expand existing curriculum for Deaf students.

Every teacher at OSD has the opportunity to apply for Foundation funds. Projects selected are based on a competitive basis and are selected by foundation trustees.

The other project that Foundation funds support is scholarships for graduating seniors and students continuing in higher education who meet the requirements.

You may tape your voided check in the brochure then tape the brochure closed and mail to the Foundation address. If you have any questions or need more information,

Please contact:

Linda Dyer, President (580-421-5241) or
Jenni Trekell. (580-622-4900 x 4931).



Oklahoma School for the Deaf Foundation for
Excellence in Education, Inc.

P. O. Box 1211

Sulphur, OK. 73086



Your monthly
contribution of as
little as \$10.00
a month will promote

excellence
in
education

for Deaf students

Oklahoma
School
Deaf
Foundation for
Excellence in

Won't you
Check it out???

The Oklahoma School for the Deaf Foundation for Excellence in Education, Inc. is pleased to announce the "Check it Out" campaign to raise funds to promote excellence in education for Deaf students.

Our goal is to have interested alumni and friends of the Foundation agree to "Check It Out" and make an easy, once a month donation of at least \$10.00 (minimum) or more.

To be a "Check It Out" participant, you will need to complete the attached form for an automatic withdrawal from your checking account.

Its simple to do—just fill out the form included in the flyer and attach a voided check from the account where the money will be withdrawn-that's all there is to it!

You may cancel this arrangement at any time, but we hope you will participate in the program for at least twelve months.

Funds will be used to provide innovative classroom curriculum and enrichment activities for students and scholarships for seniors continuing their education.

Your support will be tax deductible (EIN #73-1339954) and will directly touch lives of Deaf students in Oklahoma.

Won't you "Check It Out"??



**RETURN THIS FORM TO START YOUR
AUTOMATIC MONTHLY CONTRIBUTION**

This is your authorization to charge my checking/savings account number _____
(ACCT.#)

With _____, ABA #* _____,
(NAME OF BANK)

On the 5th day every month, beginning with the month of _____,

Year: _____, In the sum of \$ _____, which will be deposited to the Oklahoma School for the Deaf Foundation for Excellence in Education, Inc., account #344337, with Vision Bank of Sulphur, Oklahoma, on the same day as stated above.

Your name (please print) _____

Address _____

City, State, ZIP _____

Signature _____

PLEASE CHECK AMOUNT YOU WISH TO CONTRIBUTE:

_____ \$10.00 PER MONTH (MINIMUM)

_____ OTHER AMOUNT YOU WISH TO CONTRIBUTE \$ _____

**PLEASE ATTACH A CHECK WITH "VOID" WRITTEN ON IT OR A COPY OF A
VOIDED CHECK FROM YOUR BANK WHERE THE FUNDS WILL BE DRAWN.**

**ABA # IS THE 9 DIGIT BANK IDENTIFICATION NUMBER ON THE BOTTOM LEFT SIDE OF CHECK.*