

**Cyril of Alexandria
Elementary School**

**Sponsor A Student
Tuition Assistance Program**

**Yes, I would like to participate in the Sponsor A Student
program:**

Name _____

Address _____

City _____ **State** _____ **Zip** _____

Phone (Home) _____ **(Business)** _____

E-mail _____

Giftng Levels: Please check appropriate amount.

Full Tuition Sponsorship **\$2,600**

Partial Tuition Sponsorship **\$1,200**

Partial Tuition Sponsorship **\$700**

Other **\$500**___ **\$300**___ **\$200**___ **\$**_____

Please send your check to the rectory:

Saint Cyril Elementary School

Sponsor A Student

153 Penn Blvd.

East Lansdowne , PA 19050

Check Enclosed. *Please make your tax-deductible gift*

payable to

Saint Cyril Sponsor A Student.