

Bennie Edens Scholarship Fund

Print and complete this form. Mail with your contribution to:
PLHSFAA, 1220 Rosecrans St. #247, San Diego, CA 92106

Please print clearly:

Name: _____

Grad Year: _____ Name at Graduation: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____

Email: _____

To learn more about the
**Point Loma High School
Foundation and Alumni Association**
go to: www.plhsfaa.org

Please accept my contribution to the
Bennie Edens Scholarship Fund in the amount of:

\$25 \$50 \$100 \$250 \$_____

Method of Payment:

Check enclosed (made out to: PLHSFAA/Bennie)

Please charge my: **Visa** **MasterCard** **AmEx**

Card Number: _____

Billing Address: _____

Exp. Date: _____ Billing Zip: _____

Signature: _____

PLHSFAA is a 501c3 organization, and your donation is tax-deductible
as permitted by law. Please consult your tax advisor.

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