



Partnering with communities, schools, and teachers to support quality education for Tanzanian children & youth.

☐ **Student Sponsorships** (\$240/student/year, 5-year commitment suggested)

Quantity _____ x \$240 = \$ _____

Student Name(s) (if returning sponsor) _____

☐ **General Fund Donation**

☐ \$75 ☐ \$150 ☐ \$250 ☐ \$500 ☐ \$1,000 ☐ Other _____

TOTAL DONATION \$ _____

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr. ☐ Other

Name: _____

Address: _____

City, State, Zip: _____

Country: _____

Telephone: _____

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☐ **Credit Card** (select type) ☐ Visa ☐ MasterCard

Credit Card Number _____

Security Code (3 digit) _____ Expiration Date ____/____

Name on Card (please print clearly) _____

Signature (required) _____

☐ **Check enclosed payable to "Project Zawadi"**

☐ **Employer match:**

Company name _____

Amount matched _____

☐ **This donation in memory/honor of:** _____

Please notify (name and address or email): _____

Thank you for your generosity!

*Project Zawadi is recognized under section 501 (c) (3) of the Internal Revenue Code as a nonprofit organization. All contributions are tax-exempt to the full extent allowed by current IRS regulations. Project Zawadi will never share your personal information with third parties. Questions or comments? Call 866-589-6116 or email: donate@ProjectZawadi.org