

The Foy Shaw Memorial
Scholarship Committee
Application



We invite you to participate as a scholarship donor to support 3 students from our local High School with a \$1,000 Scholarship each.

Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
E-Mail Address	

Name you want to appear on the plaque:

Amount you'd like to donate:

\$ 100
 \$ 200
\$

Method of Payment

Cash
 Check
 Credit Card

If you have any questions please contact
Valerie Lott at vlott@crestviewchamber.com
or call us at 850-682-3212.

www.crestviewchamber.com