



Indiana Academy

Sponsorship Form

24815 State Road 19, Cicero, IN 46034 • Telephone: 317-984-3575 • Fax: 317-984-5081 • www.iasda.org

This sponsorship form is an agreement with the sponsor that they plan to help out a student. The completed form should be returned to the Indiana Academy Business Office. The Business Office will then be responsible for sending the sponsor a statement each month indicating how many hours the student worked and how much the sponsor should remit. The remittance is applied directly to the student's account. (IRS regulations do not permit tax deductions for tuition payments made for specific students.)

AGREEMENT

I believe in _____ and want him/her to be able to receive a quality Christian education at Indiana Academy.

Therefore, I agree to sponsor the above individual for the _____ school year for the following amount.

_____ Flat amount of \$ _____ per month for 10 months (August – May)

_____ Flat amount of \$ _____ per month for 12 months

_____ Flat amount of \$ _____ per month for _____ months

Please mail check to:

Indiana Academy
Business Office
24815 State Road 19 N
Cicero, IN 46034

Pay by credit card:

Card Number: _____ - _____ - _____ - _____

Expiration Date: ____/____

Security Code: _____

Day of the month to run card: _____

Sponsor's Name (Please print)

Signature

Mailing Address

Date

City, State, Zip

Phone Number