

DONATE-A-BOOK

To the Bayshore Christian School Library.

*Please choose a book from the
"Donate-a-Book Program Booklist."*

Book Title: _____

Donation Amount: _____

This book is donated by: _____

(Please write the name exactly as you'd like it to appear on the book plate.)

Address:

Phone No.: _____

Email: _____

In honor of: _____

(Please write the name exactly as you'd like to appear on the book plate.)

**PLEASE PRINT THIS FORM AND MAIL IT WITH YOUR CHECK
MADE OUT TO "BCS".**

Bayshore Christian School
3909 S. MacDill Avenue
Tampa, FL 33611
Attn: GeeGee Erickson

Thank you for your generosity!