

Hawai'i Alpha Delta Kappa Donation Form

TO SUPPORT THE EFFORTS OF WOMEN EDUCATORS IN THE DEVELOPMENT
OF SCHOLARSHIP, ALTRUISTIC PROGRAMS, AND OTHER ENDEAVORS

I would like to contribute to Hawai'i Alpha Delta Kappa as designated below.

Date _____

A. Donation Amount: \$_____ Please credit donation to the following purpose(s):

1. HAAK Student Scholarship _____
2. Altruism _____
3. Other _____

B. Check one (1) of the following:

1. ☐ I permit my name to be listed as a donor in the state newsletter, Ka Pine Ho'ohui.
2. ☐ Our chapter permits us to list our name as a donor in the state newsletter, Ka Pine Ho'ohui.
3. ☐ I/We prefer to remain as an anonymous donor.

C. Optional - Designate donation for one (1) of the following:

1. ☐ In honor of _____
2. ☐ In recognition of _____
3. ☐ In memory of _____
4. ☐ Other _____

Reason for donation: _____

Donor's Name _____ Chapter _____

Address _____ City/State/Zip _____

Send acknowledgment to:

Name _____

Address _____

City, State, Zip _____

Make check payable to HAWAII ALPHA DELTA KAPPA. S

Send donation form and check to State Treasurer (Remind Chapter Chairs to keep name & address of treasurer off the web for privacy. You may send information to chapter members to their emails on this form for their convenience.) Send to 2026 – 28 Biennium treasurer.

Note: Donations to HAAK are NOT tax deductible.

* * * * * *For Treasurer Only* * * * * *

Amount Received: _____ Date Received: _____

Acknowledgement sent to Donor: _____

Acknowledgement sent to Honoree: _____

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