



I WANT TO MAKE A DIFFERENCE WITH EARLY LITERACY.

We are looking for volunteers like you to donate time and resources to make a difference to a child. By choosing 1-3 things to do on this page, you are helping us spread the word of Early Literacy programs in our area. Thank you!

After you choose what you want to do on the left, please return to your ELC representative or mail/email/fax this form to:

Joan Whitson, Early Literacy Coordinator, Early Learning Coalition Putnam & St. Johns Counties, One News Place, St. Augustine, FL 32086. Fax: 386-328-5599; jwhitson@elcpsj.org. Questions? Call Joan at: 904-819-3544

Please note, if you are donating, please send this form to Joan but also please mail donations and a separate copy of this form to the address listed under the "Donate" section. Thank you!

YES! I WANT TO LEARN MORE.

- Sign me up for FREE Dolly's Readers E-Newsletter.
- I will visit www.DollysLibraryFL.com & tell others.
- I will follow @DollysLibraryFL on Twitter & share info.
- I will Become a fan on Facebook & spread the word.
(Dolly Parton's Imagination Library of Putnum & St. Johns Counties)

YES! I WANT TO VOLUNTEER.

- I want to join the Early Literacy Advisory Council and be part of one of these committees:
 - PR/Marketing:** I want to be a part of your Speakers Bureau and spread the word to local organizations.
 - Programs/Outreach:** I want to read to a child, teach literacy workshops, be a storyteller, or plan and work at special literacy and children's events.
 - Fundraising:** I want to help identify opportunities for support and raise money for early literacy.
 - Enrollment:** I want to help enroll children into the program.
- I will put a brochure display in my place of business or at a local organization.
- I will schedule the Speakers Bureau to speak at my next organization or business event.

NAME: _____

COMPANY: _____

ADDRESS: _____

CITY: _____

STATE: _____

ZIP: _____

EMAIL: _____

PHONE: _____

FAX: _____

TWITTER NAME: _____

FACEBOOK ACCT: YES/NO

IS YOUR CHILD ENROLLED IN THE LIBRARY?
YES/NO

_____ SIGN ME UP FOR USEFUL ONLINE COMMUNICATIONS ABOUT EARLY LITERACY.

YES! I WANT TO DONATE.



All donations are to cover the registration and mailing cost for children (ages 0-5) to receive an age appropriate book, delivered each month to their home mailbox for one full year:

- I Pledge:
- \$30 - One child to receive 12 books
- \$300 - Ten children to receive 12 books
- \$1,500 - Fifty children to receive 12 books
- \$3,000 - One hundred children to receive 12 books
- Other Amount: _____

Please make checks payable to The St. Johns County Education Foundation or enter credit card information below and indicate amount above.

Name on Card: _____
 Credit Card #: _____
 CC Type: _____ Exp. Date: _____
 Signature: _____

Gift will be matched by _____
 (company/family/foundation)
 form enclosed form will be forwarded

Please make checks, gifts or corporate matches payable and Mail DONATIONS ONLY to: St. Johns County Education Foundation, Attn: Donna Lueders, 40 Orange St., St. Augustine, FL 32084 or ONLINE at www.stjohns.k12.fl.us/donate/