

HIGHLAND VIEW ACADEMY

Church Family Support Form

Highland View Academy would like to invite your **CHURCH** to partner with us in our effort to make Christian Education attainable to church constituents or families who the church believes may benefit from our *Church Matching Scholarship program*.

For every dollar your church contributes toward a student, Highland View Academy will match 100% up to \$2,000 for a dormitory student or up to \$1,000 for a non-dormitory student.

We thank you along with the families who benefit from your generosity and care toward the young members in your church family.

By signing this form, your church commits to supporting the student and the family, as well as partnering with Highland View Academy in our commitment to Educate for Eternity!

Church Name _____

Church Address _____

Phone _____

Pastor _____ Treasurer _____

Email _____ Email _____

Student Name	Support Amount	Please Check One		
		Monthly Payment	Semi yearly Payment	Yearly Payment

Church Authorized Signature

Title

*Highland View Academy
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Hagerstown MD 21740*

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** Students receiving SDA Employee Dependent Education Allowance are not eligible for HVA's Church Matching Scholarship.*