

The Lowell School

203-05 32nd Avenue
Bayside, NY 11361

Email: tlschool@aol.com

Web Site: www.thelowellschool.com



Tel: 718-352-2100
Fax: 718-352-3654

Dede Proujansky
Executive Director

December 2011

Dear Business Owner,

Many people know that Albert Einstein was dyslexic. However, no one was paying attention to the fact that Ricky, an eighth grader, could not read beyond a second grade level; or that Chris, a sixth grader, could not do first grade math. After each of these children were accepted into The Lowell School, where they received the individualized attention and instruction necessary to enable them to grow and develop their skills, their achievement and testing results soared.

On Sunday, March 11, 2012 we will be holding our annual “Love for Lowell” benefit and silent auction at Tribeca Rooftop in Manhattan. We need your help! The proceeds from past year’s events have been used to purchase computers and SmartBoards, install a wireless network for Internet access for the classrooms, and to add new Phys. Ed. equipment. We have also been able to hire additional support staff. This would not have been possible without the generosity of our donors.

We are requesting your support of The Lowell School through a tax-deductible donation of a gift certificate, product/merchandise, monetary gift, and/or Journal Ad. Your donation will be acknowledged in our benefit Journal, which will be distributed to all guests at our event. Please complete the attached form/s and return to us either via regular mail, email, or fax at (718) 352-3654.

For the past 43 years, The Lowell School has distinguished itself as a not-for-profit private special education program, which serves children from all five boroughs, Westchester, and Long Island. The students are offered an appropriate education and the opportunity to learn in an environment that offers highly individualized teaching. **While most of our students receive funding from New York State, there is a large deficit that exists between state funding and the actual cost of educating these children.** The Lowell School is a 12-month intensive academic program for students aged 5 to 21 who have significant learning disabilities. Lowell also provides speech and language therapy, counseling, student socialization programs, occupational and physical therapy, art, music, home & careers, computers, sports programs, and extracurricular activities.

Please know that this brief letter could not possibly convey the magic of what we do each day, year after year. Should you have any further questions, or require additional information, please do not hesitate to contact us at (718) 352-2100. Visit us at www.thelowellschool.com.

Thank you in advance for considering our school, and most importantly, our students, for your charitable donation. We look forward to hearing from you. Best wishes for a happy holiday season.

Sincerely,

Nina Goodman

Nina Goodman
Benefit Co-Chair

Eleni Daniels
Benefit Co-Chair/Director of Development

We will provide confirmation of our 501(c)(3) status upon your request.

THE LOWELL SCHOOL

SILENT AUCTION DONATION FORM

THANK YOU FOR YOUR DONATION. **COMPLETED FORMS ARE REQUESTED BY FEBRUARY 29, 2012.**
PLEASE FAX TO 718.352.3654 OR EMAIL: EDANIELS@THELOWELLSCHOOL.COM

Donor (or Company name) as you would like it acknowledged. Please print clearly.			
Contact Name (if different from above)			
Address			
City	State	Zip	Country
Phone	Fax	E-mail	

DESCRIPTION OF ITEM/S: Please be as specific as possible, and specify individual item values. Brochures are helpful. Include name of item and description as it should appear on the bid sheet.

Estimated total fair market value: \$ _____
Other contribution: \$ _____ **Total Donation:** \$ _____

SPECIAL INSTRUCTIONS: Please note any and all exclusions, expiration dates and reservation needs. Certificates should be valid for a minimum of one year from date of event.

PLEASE CHECK IF APPLICABLE:

MERCHANDISE:	Enclosed _____	Will be delivered _____
DISPLAY MATERIALS:	Enclosed _____	Will be delivered _____
GIFT CERTIFICATE:	Enclosed _____	Will be delivered _____

- Item will be shipped to THE LOWELL SCHOOL by February 29, 2012. (See address below)
- Item will be hand-delivered to THE LOWELL SCHOOL by February 29, 2012.

DONOR SIGNATURE

DATE

NOTE: The Lowell School gratefully acknowledges your donation.

THANK YOU FOR YOUR TAX-DEDUCTIBLE SUPPORT

Please return this form with your donation to:
The Lowell School
203-05 32nd Avenue
Bayside, NY 11361
Att: 2012 Love for Lowell Benefit

For more information, please contact the
Benefit Co-Chairs: Eleni Daniels or Nina Goodman,
at 718-352-2100, or email: edaniels@thelowellschool.com, or
ngod15@yahoo.com

THE LOWELL SCHOOL SPONSORSHIP/JOURNAL AD FORM

I would like to support the specialized academic program of The Lowell School via a Sponsorship/Ad in the Benefit Journal as indicated below:

Love Sponsor \$15,000

Two (2) Tables of 10, preferred seating, signage at the event, back cover ad in journal

Success Sponsor \$7,500

Table of 10, preferred seating, signage at the event, inside back cover ad in journal

Inspiration Sponsor \$5,000

Six (6) Tickets, signage at the event, inside front cover ad in journal

Achievement Sponsor \$3,000

Four (4) Tickets, signage at the event, full page Gold ad in journal

Friend \$1,000

Two (2) Tickets, full page Silver ad in journal

Full Page (B/W) (6.25" x 8.25") \$350

Business Card (B/W) \$100

Half Page (B/W) (3.25" x 5.25") \$200

Love for Lowell listing \$50 (2 lines/30wds)

No Ad at this time. Enclosed is my tax-deductible donation.

Please attach Ad text or camera-ready artwork to this form and mail to address below by FEBRUARY 17, 2012. Email your digital ad to: edaniels@thelowellschool.com

Electronic files can be accepted in PDF or Word. Please submit B&W printout sized to dimensions listed above.

Name (as it appears on card): _____

Title: _____ Company: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

I hereby authorize Lowell to charge my credit card: Visa MasterCard AmEx Discover

Card Number: _____ Exp. Date (MM/YY): _____

Zip Code: _____ Signature: _____

Amount Enclosed \$ _____ (Please make checks payable to: **The Lowell School**)

THANK YOU FOR YOUR SUPPORT
Please return this form with your payment to:
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Bayside, NY 11361
Att: 2012 Love for Lowell Benefit

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