



SKYCREST ELEMENTARY SCHOOL  
10 North Corona Ave.  
Clearwater, FL 33765

Principal  
Anne Caparaso

Assistant Principal  
Lisa Pierzchalski

## Adopt-a-Class or Business Partnership 2023 - 2024 Membership Form

Name of Business/Individual(s) \_\_\_\_\_

Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

Contact person \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Financial Donation \$ \_\_\_\_\_ (any donation is appreciated)

Cash \_\_\_\_\_ or Check# \_\_\_\_\_ (check payable to Skycrest Elementary)

Do you have preference for a specific class, grade level, or department such as:  
ESOL, Speech, Gifted, OT/PT, PE, Art, or Music?    Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please indicate class or teacher \_\_\_\_\_

Student's Name(s) \_\_\_\_\_

If the funds are not used by the end of this school year, do you agree to have the balance placed  
in a general Adopt-A-School account to benefit Skycrest students?    Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Adopter/Partner

Date

Thank you for your generous support! Skycrest Elementary appreciates YOU!!!