Name a Seat(s) Campaign Donation Form

Contributor Information

Name _____

Address_____

City _____ State_____ Zip_____

Phone _____ Email_____

Name Recognition

Naming opportunities is limited to 60 characters, including spacing and punctuation. Please print how you would like to name your seat(s).

1. Happy Anniversary John and Karen Smith (*EXAMPLE)* September 13, 1977

Payment Options

☐ My check is enclosed payable to **RAISE THE ROOF FOR THE ARTS**

☐ To pay by Debit/Credit card go to: *sidneytheatre.org* and select "*Giving*"

- ☐ I wish to remain anonymous
- ☐ I would like to know more about endowment and capital gifts.
- ☐ I am interested in volunteering at the theatre. Please contact me.

THANK YOU!!!