

Give *YOUR* regards to *Broadway!*

- YES! You can count on my support *today!*
- YES! I want to help by pledging \$ _____ to be paid in monthly installments of \$ _____ over the next _____ months.
- No, I cannot assist financially at this time. Please keep me in mind for future support.

Enclosed is \$ _____ (or a down payment on my pledge) to become a*:

- Friend (under \$50)
- Sustainer (\$50-\$99)
- Donor (\$100-\$249)
- Contributor (\$250-\$499)
- Patron (\$500-\$999)
- Benefactor (\$1,000-\$2,499)
- Producer (\$2,500-\$4,999)
- Sponsor (\$5,000 and over)

(*Please see member benefit information on the reverse side of this sheet.)

Name

Street Address or P.O. Box

City

(_____) _____

Day Phone

State

(_____) _____

Evening Phone

Zip Code

Payment Method:

- Check (enclosed and made out to **Best of Broadway**)
- Visa or MasterCard

Card Number

_____ - _____ - _____ - _____

Expiration Date

(month) _____ / (year) _____

Name on Card

Cardholder Signature

- I prefer my donation to remain anonymous. Please do not list my name:
 - In the program
 - On the website
 - In the newsletter
- I will see if my employer can match my contribution!
- I would like to receive additional information on the following:
 - Group Tickets and/or Nonprofit Partners Tickets
 - Volunteer Opportunities
 - Auditions
 - Board of Directors Position
 - Business Sponsorship Opportunities

**Please submit this form (and check, if applicable) to:
Best of Broadway, PO Box 60832, Sacramento, CA 95860**

Best of Broadway Benefit Productions, Inc. is a tax-exempt 501 (c) (3) not-for-profit performing arts organization (ID# 68-0299967). Documentation for your records will be mailed upon receipt of donation.