

## Curtain Players Capital Improvement Campaign Donation Commitment Form

## **Sponsorship Levels**

☐ Theatre Angel	\$5,000 donation	
□ Patron Saint	\$2,500 donation	
☐ Honorable Patron	\$1,000 donation	
☐ Theatre Fan	\$250 donation	
☐ General Donation	\$	
Contact Information		
Company:		
Contact Name:		
Address:		
City:	State:	ZIP:
Cell Phone:	Business Phone:	
Email:		
O Please invoice me in quarterly installm	ents	
O Check Enclosed - Make checks payable	e to Curtain Players Theater	
O Credit Card Number		_
(Visa, MC, Amex, Discover)		
EXP. Date:/Security C	Code: (back of card)	
Signature:		
Thank you for your support of Curtains P	Player Theater and for supporting the	e arts in your community.

Please complete and return the Sponsorship Response form to:

All donations are tax-deductible to the extent allowable by law. Tax ID 13-6042674

Curtain Players Theater P.O. Box 1143 Westerville, OH 43086