

SUMMER REPERTORY THEATRE FESTIVAL

Please complete the donation form below.

Last Name _____ First Name _____

Address _____

City _____ State _____ Zip _____

Phone Number (_____) _____

Email Address _____

Please add my email address to the Summer Rep e-newsletter mailing list and event updates

I am donating: \$ _____ *

Designate donation to:

Student scholarships

Wherever the need is greatest

Purchase of _____

In memory of _____

Other _____

**You will be mailed acknowledgement and receipt of your donation. Your donation may be tax deductible upon advisement of your tax professional.*

Please contact me to discuss Summer Rep advertising and sponsorship opportunities.

Please contact me to discuss planned giving.

Payment Method

Check or Money Order (US dollars)

Visa

Master Card

AMEX

Discover

Name as it appears on credit card _____

Credit Card # _____ Exp Date _____

Signature _____

Please mail this completed form and payment to:

Summer Repertory Theatre

Santa Rosa Junior College

1501 Mendocino Avenue

Santa Rosa CA 95401

Questions?

Contact Shannon Jaeger, Business Manager

707.527.4419 or sjaeger@santarosa.edu

Thank you!