



Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Pacesetter.....\$25,000 and above
Champion.....\$10,000 to \$24,999
Benefactor.....\$5,000 to \$9,999
Sponsor.....\$2,500 to \$4,999
Guarantor.....\$1,000 to \$2,499

Patron.....\$500 to \$999
Donor.....\$250 to \$499
Contributor.....\$100 to \$249
Sustaining Member.....\$50 to \$99
Friend.....Up to \$49

This contribution is tax deductible to the full extent of the law.
Donors' names will be listed in a future Symphony program unless anonymity is requested.

(Name as you would like it listed in the Program Magazine)

I/We Pledge \$\_\_\_\_\_ to the Wichita Symphony Orchestra.

( ) Enclosed is my check

( ) Bill me for the entire pledge on \_\_\_\_\_

Charge the full amount to my Credit Card (Visa, Mastercard, Discover, Amex)

Card Number \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code \_\_\_\_\_

FOR OFFICE USE ONLY

Payment(s):

\$\_\_\_\_\_ Date: \_\_\_\_\_ Payment Method: \_\_\_\_\_ Date Acknowledged \_\_\_\_\_
\$\_\_\_\_\_ Date: \_\_\_\_\_ Payment Method: \_\_\_\_\_ Date Acknowledged \_\_\_\_\_
\$\_\_\_\_\_ Date: \_\_\_\_\_ Payment Method: \_\_\_\_\_ Date Acknowledged \_\_\_\_\_

PLEASE RETURN THIS FORM TO THE SYMPHONY OFFICE WHEN COMPLETED