

AT&T PERFORMING ARTS CENTER

Yours to Discover

Name _____
Address _____ City _____
State _____ Zip _____
Phone _____ ☐ mobile ☐ home ☐ office

Participation: (Check all that apply)

- ☐ I would like to make a gift to the Center in support of the Annual Fund: \$ _____
- ☐ I would like to receive Center Circle benefits:
- | | |
|--|---|
| <input type="checkbox"/> Silver \$250 | <input type="checkbox"/> Gold \$500 |
| <input type="checkbox"/> Platinum \$1,000 | <input type="checkbox"/> Emerald \$2,500 |
| <input type="checkbox"/> Ruby \$5,000 | <input type="checkbox"/> Diamond \$10,000 |
| <input type="checkbox"/> Founders \$15,000 | <input type="checkbox"/> President's \$25,000 |
| <input type="checkbox"/> Chairman's \$50,000 | |

Preferred listing for public acknowledgements

- _____
- ☐ I prefer to remain anonymous.

Payment Options:

- ☐ Enclosed is my check for \$ _____ payable to the AT&T Performing Arts Center.
- ☐ A donation of \$ _____ will be allocated through a foundation, company, or donor-advised fund.
- ☐ A company gift match of \$ _____ will be sent as partial payment.
- ☐ Please charge \$ _____ to my credit card today. ☐ American Express ☐ MasterCard ☐ Visa
- ☐ I'd prefer to pay my donation in monthly installments billed to my credit card
(first payment must be included with this form).

Card Number _____
Expiration Date _____ Security Code _____
Signature _____