

Patron Donation Form

PLEASE SELECT A COMFORTABLE ANNUAL DONATION LEVEL. WE ARE GRATEFUL FOR YOUR GENEROUS SUPPORT!

_____ \$125

_____ \$250

_____ \$500

_____ \$1,000

_____ Other

DONATION INFORMATION:

Check (make checks payable to Civic Theatre West)

Credit Card: Discover VISA Mastercard

Name on card: _____

Card No.: _____

Exp. Date: _____

Signature: _____

Please mail this completed form to:

Civic Theatre West, 241 Vernon St., Roseville, CA 95678.