

State College Choral Society
Donor Form

Name _____

Address _____

Phone _____ Email _____

I would like to support the State College Choral Society as follows (please check preferred level of giving):

_____ *Conductor's Circle* \$2,500 and higher
4 Tickets to January and May Concerts, *Voices of the Holocaust* CD, 2 Tickets to Valentine's Dinner Dance, Program Listing

_____ *Angel* \$1,000-2,499
4 Tickets to January and May Concerts, *Voices of the Holocaust* CD, Program Listing

_____ *Benefactor* \$750-999
4 Tickets to January and May Concerts, *Songs of the Season* CD, Program Listing

_____ *Patron* \$500-749
2 Tickets to January and May Concerts, Program Listing

Contributions to the State College Choral Society are tax deductible.

_____ *Sponsor* \$240-499
2 Tickets to January or May Concerts, Program Listing

_____ *Donor* \$100-249
1 Ticket to January or May Concert, Program Listing

Enclose check and send to:
State College Choral Society
P.O. Box 675
State College, PA 16804

_____ *Friend* \$50-99
Program Listing

Name(s) for program listing: _____

_____ I prefer that my name not be listed.

_____ Please do not send complimentary tickets (my entire contribution will be tax deductible).

Thank you for supporting the arts in our community