

DONATION FORM FOR MAILED GIFTS

DONOR CONTACT INFORMATION

Name (as you would like to be recognized in writing):

Contact Name:	 		
Organization Name (if any):			
Address Line 1:			
Address Line 2:			
City:		Zip	
Phone Number:			

ABOUT YOUR GIFT

This gift is from (circle one)

individual/household corporation foundation or trust donor advised fund other_____

Giving Level (circle one)

\$100 \$250 \$500 \$1,000 \$2,500 \$5,000 \$10,000 Other_____

Pledge for Future Support

I will continue to give at this level for ______ years. Please create a pledge and send me an invoice.

\$_____ per year X # of years _____ = Total Pledge of \$_____

Legacy Gift Information

[] I have included or plan to include The Purple Rose Theatre Company in my estate plans, please send information on the Purple Rose Legacy Society

Signature	Date	Signature	Date			
Please mail this form to: Purple Rose Theatre 137 Park Street, Chelsea, MI 48118						
Questions? Please call (734) 433-7782 x 29 or email <u>donate@purplerosetheatre.org</u>						
To give online, please visit <u>www.purplerosetheatre.org/giving</u>						