



SEAN DANIELS  
ARTISTIC DIRECTOR

BILLY RUSSO  
MANAGING DIRECTOR

2019/2020  
SEASON

THE  
Royale

SILENT SKY

Cabaret

"MASTER HAROLD"  
...AND THE BOYS

THE LEGEND OF  
GEORGIA  
MCBRIDE

WOMEN IN  
Jeopardy!

PO BOX 1631  
TUCSON, ARIZONA 85702  
520-884-8210

PO BOX 619  
PHOENIX, ARIZONA 85001-0619  
602-256-6899

ARIZONATHEATRE.ORG

# INDIVIDUAL 2019/20 DONOR CONTRIBUTION FORM

I/we would like to support Arizona Theatre Company's artistic programs and community outreach by making a gift/pledge of \$ \_\_\_\_\_ to the 2019/2020 Annual Fund at the following donor level:

## ANNUAL FUND

- FAN (\$249 and below)
- FRIEND (\$250+)
- PATRON (\$500+)
- BACKER (\$1,000+)

## CIRCLES OF GIVING

- DIRECTOR'S CIRCLE (\$2,000+)
- DESIGNER'S CIRCLE (\$3,000+)
- PRODUCER'S CIRCLE (\$5,000+)
- PLAYWRIGHT'S CIRCLE (\$7,500+)
- ARTIST'S CIRCLE (\$10,000+)

- ARTISTIC DIRECTOR'S CIRCLE (\$15,000 for one and \$20,000 per couple, space limited)
- PRODUCTION SPONSOR (\$25,000+)

Name \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

I/we would like to be listed in the program as: \_\_\_\_\_

I/we would like this gift to remain anonymous.

This gift is  in honor of/  in memory of (Choose one): \_\_\_\_\_

Address \_\_\_\_\_

Message \_\_\_\_\_

I plan to recommend a grant from a donor-advised fund or foundation. I understand that I cannot accept tangible benefits such as complimentary tickets.

My gift is being matched by my employer: \_\_\_\_\_

Please send me information on how to include Arizona Theatre Company in my estate plans.

Arizona Theatre Company is already in my estate plans.

I/we wish to support Arizona Theatre Company with an ongoing Sustainer gift of \$ \_\_\_\_\_, to be charged to my credit card:

Monthly (charged on the 15th of each month)

Annually (charged 1 time per year) Your first installment will be charged upon receipt

Your Sustainer contributions continue uninterrupted as long as you wish. You may contact us at any time to make a change.

I/we would like to pledge this gift and will make payments in the following manner:

Form of payment:  Check  Credit Card  Stock  Other \_\_\_\_\_

Date of payment(s): \_\_\_\_\_

Please make checks payable to Arizona Theatre Company.

Name of stock or Donor Advised Fund: \_\_\_\_\_

Credit Card:  American Express  MasterCard  Visa

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ CSV \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Questions? Contact Julia Waterfall-Kanter, Director of Philanthropy, at 520-884-8210 x7301 or [jwkanter@arizonatheatre.org](mailto:jwkanter@arizonatheatre.org)