

Kansas City Ballet

Monthly Giving Form

Yes! I wish to invest in the Kansas City Ballet by making a total annual contribution of: \$_____

- | | |
|--|--|
| <input type="checkbox"/> \$ 25/month = \$300 annual gift | <input type="checkbox"/> \$100/month = \$1,200 annual gift |
| <input type="checkbox"/> \$ 50/month = \$600 annual gift | <input type="checkbox"/> \$150/month = \$1,800 annual gift |
| <input type="checkbox"/> \$ 75/month = \$900 annual gift | <input type="checkbox"/> \$250/month = \$3,000 annual gift |
| <input type="checkbox"/> \$83.33/month = \$1,000 annual gift
(Patron Society level) | <input type="checkbox"/> Other _____ |

Name _____
 Street _____
 City _____ State _____ Zip _____
 Phone () _____ Email _____

<input type="checkbox"/> Please Invoice me at the following address: _____ _____ _____	I would like to be charged: <input type="checkbox"/> monthly <input type="checkbox"/> quarterly <input type="checkbox"/> biannually
<input type="checkbox"/> Please charge my credit card: <input type="radio"/> American Express <input type="radio"/> Discover <input type="radio"/> MasterCard <input type="radio"/> Visa Credit Card Number: _____ Expiration Date: _____ Name On Card: _____ Signature: _____	<input type="checkbox"/> Please withdraw automatic payment from my checking account: Bank Name: _____ Bank Routing #: _____ Checking Account #: _____ Name on Account: _____ Signature: _____

Gifts of \$100 or more are acknowledged in our program. How would you like your name to read?

Please complete and mail to: **Kansas City Ballet**
 Development Department
 1616 Broadway
 Kansas City, MO 64108
 Or fax to: Kansas City Ballet Development Department
 816-931-1172

If you have any questions regarding monthly giving please contact Bridget Charcut @ 816-931-2232 ext 1345 or bcharcut@kcballet.org.

Thank you for your support of Kansas City Ballet!