

CAROLINA PERFORM INGARTS

PLEDGE FORM

Mail To: Carolina Performing Arts
Development
134 East Franklin Street
CB #3233
Chapel Hill, NC 27599

NAME(S) – As you would like it to appear in the program book

ADDRESS CITY/STATE/ZIP

EMAIL PHONE

I/We wish to make a gift of \$_____ to Carolina Performing Arts (CPA) to support:

- Annual Operations The Student Ticket Angel Fund The CPA Endowment

Payment Information:

- My check to Carolina Performing Arts is enclosed.
- I'd like to make a one-time gift via credit card.
- Sustaining Gift—I'd like to make a recurring gift via credit card of \$_____ each month beginning _____(month/year) and ending _____(month/year).

OR

I'd like to make a recurring gift via credit card of \$_____ each month beginning _____(month/year) and I will notify you when to end the recurring charge.
You card will be charged on the 15th of each month

- This gift will be matched by _____(company/foundation name).
Please enclose matching gift form.

Credit card type	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express
Credit card number	
Expiration date	
Signature	
Today's date	

- I/We decline the benefits associated with this gift so the tax value will be the full amount given.

Thank you for your support of the arts at Carolina!
Please contact Susin Seow at susin.seow@unc.edu or 919.843.3307 with any questions.

