

Springer Society ♦ Annual Fund Campaign

Yes, I/we want to help protect the Springer!

A contribution for preservation and programs is enclosed.

- Challenger (\$2,500+)
- Guardian (\$1,000+)
- Patron (\$750+)

- Benefactor (\$500+)
- Star (\$250+)
- Partner (100+)

- Student(s) (\$50+)
(18-years-old and younger)

NAME _____ PHONE (H) _____

ADDRESS _____ PHONE (W) _____

CITY/ST/ZIP _____ E-MAIL _____

I wish to pay as follows:

My gift of \$ _____ is enclosed.

I pledge a gift of \$ _____.

Start date: _____

Please remind me: Quarterly Semi-Annually

Signature (required) _____

Please charge my:

- Mastercard
- VISA
- Discover
- American Express

Card No. _____ Expires ____/____

Signature _____

Matching Gift Program

Many companies will match your gift, thereby multiplying its value. Please obtain the proper form from your employer, fill it in, and return the form with your gift.

My gift will be matched by my employer:

Company Name

Name(s) that you wish to appear in the playbill

Thank you for your generosity!
Return to: Springer Opera House, 103 Tenth Street, Columbus GA 31901