CHARLES R. WOOD THEATER GALA SPONSORSHIP ORDER FORM

NAME:

ADDRESS:

EMAIL:

PHONE:

BUSINESS NAME (IF APPLICABLE) OR NAME AS YOU WOULD LIKE IT TO APPEAR ON LISTINGS

| WHICH SPONSORSHIP HAVE YOU SELECTED? |
|---|
| ENSEMBLE [\$300] UNLIMITED! |
| CHORUS [\$750] UNLIMITED! |
| DIRECTOR [\$1,000] UNLIMITED! |
| PLAYRIGHT [\$2,500] UNLIMITED! |
| PRODUCER [\$5,000] UNLIMITED! |
| VIRTUOSO [\$7,500] UNLIMITED! |
| PREFER TO BUY TICKETS OR A TABLE? |
| I WOULD LIKE TO RESERVE TICKETS AT \$175 EACH |
| I WOULD LIKE TO RESERVE TABLE(S) AT \$1,200 EACH |
| PAYMENT METHOD |
| CHECK ENCLOSED PLEASE SEND ME AN INVOICE CREDIT CARD |
| # EXP CVV |
| PLEASE FORWARD ANY QUESTIONS, COMPLETED FORMS AND LOGO FILES TO EMILY@WOODTHEATER.ORG OR BY MAIL AT 207 GLEN STREET, GLENS FALLS, NY 12801 |
| ONCE YOUR SPONSORSHIP IS CONFIRMED, WE WILL CONTACT YOU TO CONFIRM YOUR GUESTS' NAMES AND MEAL SELECTIONS! |
| FOR RECOGNITION IN THE INVITATION. PLEASE SECURE YOUR SPONSORSHIP BY APRIL 15TH |

FOR RECOGNITION IN THE PROGRAM, PLEASE SECURE YOUR SPONSORSHIP BY JUNE IOTH