

Burien Little Theatre's 9-10-11 Fundraiser

Pledge Form

Donor Information (please print or type)

Name _____

Address _____

Telephone _____

Email _____

Pledge Information

I (We) am (are) pledging \$_____ per hour for the 24 hours the 9-10-11 fundraiser is scheduled, for a total pledge contribution of \$_____.

Enclosed is my (our) pledge contribution in the form of _____ check payable to Burien Little Theatre _____ cash. OR _____ I donated online at www.burienlittletheatre.org using the "Donate" button on the "Donors" page.

Gift will be matched by _____
[name of company/organization]

_____ matching gift form enclosed _____ matching gift form to be forwarded

Donation Acknowledgement Information

Please use the following name(s) on all donation acknowledgments: _____

____ I (We) wish to have my (our) gift remain anonymous.

Signatures: _____

Date: _____

Please mail this form with payment (or just the form if donating online) to:

Burien Little Theatre
P.O. Box 48121
Burien, WA 98148

ALL CONTRIBUTIONS ARE TAX DEDUCTIBLE TO THE FULL EXTENT OF THE LAW,
AS BURIEN LITTLE THEATRE IS A 501(C)(3) NONPROFIT.