

Next Act Theatre Donation Form



Mail donations to: Next Act Theatre, PO Box 394, Milwaukee, WI 53201-0394

- Producer's Circle [\$1,000 & up] Director [\$500 - \$999]
 Leading Actor [\$250 - \$499] Supporting Actor [up to \$249]

- Enclosed is a check for \$ _____ [payable to Next Act Theatre]
 Please charge \$ _____ one time monthly quarterly annually
[We accept American Express, Discover, MasterCard and VISA]

Card # _____ Exp Date _____ Sec Code _____

- I/We pledge to donate \$ _____ by June 30.
 Enclosed is a corporate matching gift form so that this gift may be multiplied.
 I/We have named Next Act Theatre in our estate plans.

Name (s) _____
[As you wish to be listed in our Playbill]

- I/We would like to remain anonymous

Address _____

City, State Zip _____

Email _____ Phone _____

- Yes, sign me up for the Next Act Theatre snail mail list
 Yes, I would like to receive emails regarding upcoming events at Next Act

The excess of your contribution beyond the value of the benefits received is deductible to the full extent allowed by law. Please consult your tax advisor.