



Yes! I'd like to help make Near West Theatre's season possible!

Donation Options:

- Please accept my tax-deductible donation of \$ _____
- I'd like to make a sustaining gift. Please charge my credit card \$ _____ per month for a total of _____ months.
- Double your gift! If your employer has a matching gift program, write the name of the company here and make your donation to Near West Theatre go twice as far!

Your Info:

_____ *name*

_____ *address*

_____ *city*

_____ *state*

_____ *zip*

_____ *phone*

_____ *email*

I'd like to have my donation listed in the playbill as follows:

_____ OR, I'd like to have my donation in the playbill on the name/honor/memory (circle one) of:

Please add me to your mailing list

Please remove me from your mailing list

Payment Options:

Check (*please make payable to Near West Theatre*)

Visa

Mastercard

_____ *name (as it appears on card)*

_____ *account number*

_____ *exp. Date*

_____ *Address (if different from above)*

_____ *Zip*

_____ *signature*

Please remit to: Near West Theatre 6514 Detroit Avenue Cleveland, OH 44102. Thank you for your support!