



I want to help bring
the arts to life at Cain
Center for the Arts!

NAME

STREET ADDRESS

CITY, STATE, ZIP

EMAIL

PHONE

My total commitment to the campaign for Cain Center for the Arts:

\$ _____

SIGNATURE

RECOGNITION

May we honor your contribution by recognizing you in our publications?

Anonymous donation

Public donation

NAME(S) TO BE LISTED

I INTEND TO FULFILL MY PLEDGE AS FOLLOWS: *(select one)*

My entire gift is enclosed.

My initial payment is enclosed.

I have made my gift online.

Please contact me to arrange a gift of stock.

Please charge my credit card:

NAME ON CARD

NUMBER

EXP.

CVC

FOR CONTRIBUTIONS OF \$1,000 OR MORE, EQUAL PAYMENTS MAY BE MADE OVER A PERIOD OF 2 YEARS. PLEASE CHOOSE FROM THESE OPTIONS:

ANNUALLY, BEGINNING *(date)* _____

BI-ANNUALLY, BEGINNING *(date)* _____

QUARTERLY, BEGINNING *(date)* _____

If you would like information about making a planned gift to Cain Center for the Arts, please contact Anita Overcash at **980.689.3101**.