



## Annual Fund

- Patron - \$1,000     
  Principal - \$500     
  Soloist - \$250  
 Corps de Ballet - \$100     
  Friend - Other \$ \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_

- I would prefer my/our name to be listed in KCB publications as:  
 \_\_\_\_\_  
 Please list me as *anonymous*.  
 I do not wish to receive any benefits that would decrease the tax deductibility of my gift.  
 Area of support: \_\_\_\_\_

### PAYMENT OPTIONS FOR YOUR CONTRIBUTION *(Select your preference.)*

- My check or cash in the amount of \$ \_\_\_\_\_ is enclosed  
*(Please make checks payable to Kansas City Ballet)*  
 Credit Card:     
  Amex     
  Visa     
  MasterCard     
  Discover  
 Card # \_\_\_\_\_ Exp. date \_\_\_\_\_ Amount: \$ \_\_\_\_\_  
 Please send me a payment reminder (month/date/year) \_\_\_\_\_  
 I would like to set up the following payment plan (ie: \$125/month for 12 months, to begin 7/15/2014)  
 \_\_\_\_\_  
 \_\_\_\_\_

- I would like to make a gift of stock; please contact me.  
 My employer will match my gift; a matching gift form is enclosed.

### MULTI-YEAR OPTION

I would like to make a multi-year pledge of the following:

Year	Start Month	Pledge Amount	Instruction regarding payments/reminders:
20__			
20__			
20__			

Signed \_\_\_\_\_ Dated \_\_\_\_\_

**Thank you!**

Kansas City Ballet, 500 W Pershing Road, Kansas City, MO 64108  
 Kansas City Ballet Association is a tax-exempt 501(c)(3) MO Corporation Federal ID# 43-6052680.