



Annual Fund

- Bolender Society - \$2,500
 Patron - \$1,000
 Principal - \$500
 Soloist - \$250
 Corps de Ballet - \$100
 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	Pledge Amount	Instruction regarding payments/reminders:
20__ - 20__		
20__ - 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.