



Santa Maria Philharmonic Society
120 E. Jones Street, Suite 120
Santa Maria, CA 93454

INDIVIDUAL GIVING CONTRIBUTION FORM

I would like my gift to support the Endowment Fund
 Children's Programs
 Membership in the Society
 General Fund
 Other _____

Personal Information This is my first gift to the Santa Maria Philharmonic Society.
 I am renewing a gift to the Santa Maria Philharmonic Society.

First Name _____ MI _____ Last Name _____

E-mail Address _____ I would like this gift to remain anonymous.

Please list your name(s) as you would like it to appear in the Philharmonic acknowledgements and program listings (separated by commas):

Address _____

City _____ State _____ Zip _____

Home Phone _____ Mobile Phone _____

This is a new address or telephone number.

Membership Giving Levels

- | | |
|--|---|
| <input type="checkbox"/> Member (\$50 - \$99) | <input type="checkbox"/> Champion (\$2,000 - \$3,499) |
| <input type="checkbox"/> Sustaining (\$100 - \$249) | <input type="checkbox"/> Guarantor (\$3,500 - \$4,999) |
| <input type="checkbox"/> Premier (\$250 - \$499) | <input type="checkbox"/> Distinguished (\$5,000 - \$9,999) |
| <input type="checkbox"/> Patron (\$500 - \$999) | <input type="checkbox"/> Luminary (\$10,000 +) |
| <input type="checkbox"/> Benefactor (\$1,000 - \$1,999) | |

Matching Gifts

Company name _____ Anticipated Match Amount _____

Payment

Please charge my credit card for the full amount of \$ _____ Make checks payable to **SMPS**

Credit Card Type Visa MasterCard Number on Card _____

Name on Card _____ Expiration Date _____

Signature _____ V-Code _____

Please mail this completed form, with check payable to Santa Maria Philharmonic Society to the address above.