THEATRE FOR A NEW AUDIENCE: A SEAT FOR SHAKESPEARE

Yes, I would like to name a seat in	n the Samuel H. Scripps Mainst	age at Polonsky Sh	akespeare Center.
Please accept my gift of \$5,0)00 for one (1) seat. 🔲 Please	e accept my gift of	\$9,000 for two (2) seats.
Plaque Dedication Text: Plaque size with up to 24 characters per line (incount.			pe. Two lines of text are permitted, ations to" must be included in the space
SEAT ONE			
SEAT TWO (IF PURCHSING TWO)	Please repeat dedication from sea	t one	
Please designate my seat gift to The Theatre's Capital Campa The Theatre's annual fund.			
and programs. See the back of th	ne form for Producer Circle levels	and benefits.	al general support for its productions I choose to waive my benefits.
I cannot name a seat or join the Please accept my gift to the			<u>.</u>
Donor Information			
NAME_			
ADDRESS_			
		STATE	ZIP
	usly. Please do not include my		
Payment Information Please find my check made of the last of the	ing a gift of stock.	nce enclosed.	
NAME AS IT APPEARS ON CREDIT	CARD		
CARD NUMBER			
EXPIRATION DATE	CODE		
Signature			Date

For more information, contact James Lynes, Director of Institutional Advancement, at 212-229-2819 x 29, or by e-mail at jlynes@tfana.org. Please send your gift form with payment to: Theatre for a New Audience / 154 Christopher Street, Suite 3D / New York, NY 10014. You may also scan your completed form and e-mail it to jlynes@tfana.org. Thank you for your support!