

Donor Information

Name <small>(As you would like it to appear in the program)</small>	
Street Address	
City, State ZIP Code	
Day Phone	
Eve Phone	
E-Mail	

**I want to help the Rep by supporting its artistic and education programming,
both on and off the stage!**

Please enroll me in the category indicated below:

Advocate, \$2,500+
 Patron, \$500 - \$999
 Friend, \$100 - \$249
 Member, \$10 - \$49
 Partner, \$1,000 - \$2,499
 Supporter, \$250 - \$499
 Fellow, \$50 - \$99

Payment Information

Enclosed is a **check** for \$_____ payable to Kansas City Repertory Theatre
 Charge \$_____ **NOW** to my credit card
 Charge me in _____ **installments** of \$_____/month or \$_____/quarter for a total of \$_____
(All gifts will be charged in full by June 30, 2012)
 I would like to make a gift of stock

Credit card type	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover
Credit card number	
Expiration date	
Security Code <small>3 digit # on back of MC/Visa/Disc or 4 digit # on front of AmEx</small>	
Signature(s)	
Date	

My company will match my gift! Company/foundation _____
 Form enclosed Form will be forwarded
 I (we) wish to talk to visit with someone at KC Rep about planned giving

Mail this form to:

Kansas City Repertory Theatre
 Attn: Development Department
 4825 Troost Ave, Ste 101
 Kansas City, MO 64110