

**THE COMMUNITY THEATRE OF HOWELL**  
**P.O. BOX 533**  
**HOWELL, MICHIGAN 48844**  
**517-545-1290**  
**www.cththeatre.org**

**PATRON CATEGORIES**

The Community Theatre of Howell has established for your convenience the following categories of patron sponsorships. We strongly urge you to consider becoming a supporter of the arts in Livingston County by joining the ranks of our sponsors in the category that is right for you. Your contributions, with the exception of of value of season tickets, is tax-deductible.

<u>CATEGORY</u>	<u>AMOUNT</u>	<u>BENEFITS</u>
<b>Friend of CTH</b>	<b>\$25 plus</b>	Program recognition, newsletter, tax-deductible receipt, non-voting membership
<b>Mezzanine</b>	<b>\$50 plus</b>	Same as above benefits
<b>Director's Circle</b>	<b>\$100 plus</b>	One season ticket, program recognition, newsletter, tax-deductible receipt for balance of contribution, non-voting membership
<b>Dress Circle</b>	<b>\$200 plus</b>	Two season tickets plus all the above benefits
<b>Orchestra</b>	<b>\$300 plus</b>	Four season tickets plus all the above benefits
<b>Benefactor</b>	<b>\$500 plus</b>	Four season tickets, two tickets to our annual Gala, plus all the above benefits
<b>Angel</b>	<b>\$1000 plus</b>	Eight season tickets, two tickets to our annual Gala, plus all the above benefits

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NAME \_\_\_\_\_

COMPANY \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY, STATE, ZIP \_\_\_\_\_

EMAIL \_\_\_\_\_ HOME PHONE \_\_\_\_\_

PATRON CATEGORY \_\_\_\_\_ AMOUNT OF DONATION \_\_\_\_\_

Paid by: CHECK # \_\_\_\_\_ CASH \_\_\_\_\_ VISA \_\_\_\_\_ MASTERCARD \_\_\_\_\_

CREDIT CARD NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

HOW DO YOU WANT YOUR NAME TO APPEAR IN THE PROGRAM?  
 \_\_\_\_\_

MAKE CHECKS PAYABLE TO CTH

MAIL TO Vera Cunningham, Patron/Membership Chair, 115 Victoria Park Dr., Howell, MI 48843