



YES, I WISH TO BE A FRIEND OF THE WAUKESHA CIVIC THEATRE THROUGH MY SUPPORT

Enclosed is a check made payable to the **Waukesha Civic Theatre** in the amount of \$\_\_\_\_\_.

Charge \$\_\_\_\_\_ to my MasterCard, Visa, American Express, or Discover Card (*circle one*).

#\_\_\_\_\_ Expires \_\_\_\_/\_\_\_\_/\_\_\_\_\_

I pledge \$\_\_\_\_\_.

All contributions support the Waukesha Civic Theatre, its programs and their associated expenses. Your gift is fully tax deductible according to the IRS code.

I WOULD LIKE MY GIFT TO SUPPORT

Annual Operating Fund       Endowment

Please note that if no box is checked your donation will go to WCT's Annual Operating Fund.

\_\_\_\_\_  
Print Name (*as you would like it listed in the program*)

Please make my gift anonymous

\_\_\_\_\_  
Place of Occupation & Address  YES  NO  
Matching Gift Program

\_\_\_\_\_  
Individual Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Telephone # Email Address

\_\_\_\_\_  
Signature

**Please Mail to Waukesha Civic Theatre  
264 West Main Street, Waukesha, WI, 53186**