



Contribution Form

Enclosed is my gift to help The Goshen Players reach for new heights!

- \$25.00 Friend
 \$50.00 Patron
 \$100.00 Benefactor
 \$250.00 Player
 \$500.00 Angel
 _____ Other

Name _____

Mailing Address _____

Check here to be excluded from mailing list

City _____ State _____ Zip _____

E-mail address _____

Please list my/our name as a donor as follows:

Method of Payment

MasterCard Visa Check Enclosed (make payable to The Goshen Players)

Card # _____ Exp. Date _____ Total to be charged: \$ _____

Signature _____

How did you hear about The Goshen Players?

- Newspaper (list): _____ Radio (list): _____ Previous donor
 Been to previous show(s) or received brochure in mail Website Friend
 Other (list): _____

As a 501(c)3 non-profit organization, your donation to the Goshen Players is tax-deductible to the fullest extent of the law.

Please mail completed form, along with payment to:
The Goshen Players, Inc.
P.O. Box 63
Goshen, CT 06756-0063