

Friends of the

Endries
PERFORMING ARTS CENTER

PLEASE CHECK ONE OF THE SPONSORSHIP LEVELS BELOW.

GIFTS PAID OVER THREE YEAR SPAN

☐ **Maestro Level: \$100,000**

- Acknowledgement of sponsorship at each performance
- Recognition with two pages of advertising in the performance program
- Eight (8) tickets to every show and the afterglow party (at a local establishment)

☐ **Patron Level: \$50,000 or More**

- Acknowledgement of sponsorship at each performance
- Recognition with one page of advertising in the performance program
- Six (6) tickets to every show and the afterglow party (at a local establishment)

☐ **Orchestra Level: \$25,000 or More**

- Acknowledgement of sponsorship at each performance
- Recognition with one page of advertising in the performance program
- Four (4) tickets to every show and the afterglow party (at a local establishment)

GIFTS PAID ANNUALLY

☐ **Center Stage Level: \$10,000 or More**

- Acknowledgement of sponsorship at each performance
- Recognition with a half page of advertising in the performance program
- Two (2) tickets to every show and the afterglow party (at a local establishment)

☐ **Stage Right Level: \$5,000 or More**

- Acknowledgement of sponsorship at each performance
- Recognition with a quarter page of advertising in the performance program
- Two (2) tickets to every show

☐ **Stage Left Level: \$2,500 or More**

- Acknowledgement of sponsorship at each performance
- Recognition with a one-eighth page of advertising in the performance program

☐ **House Level: \$1,000**

☐ **Curtain Level: \$500**

☐ **Friend Level: \$250**

- Acknowledgement of sponsorship at each performance and donor listing in performance program

You must return this form by August 24, 2026 to guarantee recognition in the program.

Contributor: _____ (Please Print)

Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

PLEDGE AMOUNT \$ _____

PAYMENT OPTIONS: Please check one box.

☐ Please send invoice for a December 31 payment

☐ Check enclosed: Amount \$ _____
Check # _____

- Make checks payable to:
Friends of the Endries Performing Arts Center
- Mail checks and this form to:
Friends of the Endries Performing Arts Center
P.O. Box 122
Brillion, WI 54110

Contributor's Signature _____

Date _____