Print a copy of this page with your web browser for each seat that you wish to sponsor.

RESERVE ME A *Seat* IN THE *Spotlight* AT THE PINOLE COMMUNITY PLAYHOUSE

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ MOBILE PHONE _____

EMAIL _____

CHECK ONE

____ FULL PAYMENT **$175** UNTIL 6/30/11 **$250** AFTER 6/30/11

____ 3 PAYMENTS OVER SIX MONTHS **$100 + $75 + $75** FROM DATE OF SUBMISSION

PAYMENT OPTIONS

____ ENCLOSED IS A **CHECK** FOR FULL PAYMENT $_____

____ ENCLOSED IS A **CHECK** FOR **$100** FIRST INSTALLMENT OF THREE
(Make check payable to: Pinole Community Players)

____ PLEASE **CHARGE** MY ___ VISA ___ MASTERCARD

CARD NUMBER |__|__|__|__| |__|__|__|__| |__|__|__|__| |__|__|__|__|

EXPIRATION ____ /____

SIGNATURE _____

For your seat sponsorship include up to three (3) lines, with a maximum of 20 characters and spaces per line. Print the text for the seat arm plaque.

|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|

|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|

|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|

Please send completed seat sponsorship forms and payment to:

Pinole Community Players
PO Box 182, Pinole, CA 94564
If you have any questions, please call (510) 223-3598

Seat sponsors must purchase tickets to any performance at the playhouse and are not guaranteed seating in chairs bearing their names.
All contributions are fully tax-deductible within the limits of state and federal laws, Non-profit 501 (c)(3) Federal I.D. No. 94-3110708.