



North County Dance and Performing Arts Foundation

Our Members enjoy these benefits:

Friend of the Arts - \$50

- Acknowledgement on the Foundation Page of all major performance programs for a full season

Apprentice Circle - \$100

- Acknowledgement on the Foundation Page of all major performance programs for a full season
- One (1) ticket to the performance of your choice

Soloist Circle - \$250

- Acknowledgement on the Foundation Page of all major performance programs for a full season
- Two (2) tickets to the performance of your choice

Choreographer's Circle - \$500

- Acknowledgement on the Foundation Page of all major performance programs for a full season
- Two (2) tickets to performance of your choice
- Half page advertisement in two major performance programs

Patron's Circle - \$1,000

- Acknowledgement on the Foundation Page of all major performance programs for a full season
- Four (4) tickets to performances of your choice
- Full page advertisement in two major performance programs

Bravo! Circle - \$2,500

- Acknowledgement on the Foundation Page of all major performance programs for a full season
- Eight (8) tickets to performances of your choice
- Full page advertisement in two major performance programs

(please cut along dotted line and return this form with your membership donation)

Foundation Membership Form

I want to join the North County Dance and Performing Arts Foundation in

Keeping the Arts Alive!

at the following level of membership:

- | | | | | | |
|--------------------------|---------------------------------------|--------------------------|----------------------------------|--------------------------|----------------------------------|
| <input type="checkbox"/> | Bravo! Circle - \$2,500 | <input type="checkbox"/> | Patron's Circle - \$1,000 | <input type="checkbox"/> | Soloist Circle - \$250 |
| <input type="checkbox"/> | Choreographer's Circle - \$500 | <input type="checkbox"/> | Apprentice Circle - \$100 | <input type="checkbox"/> | Friend of the Arts - \$50 |

Member Name: _____

Mailing Address: _____

e-mail Address: _____ Phone Number: _____

Credit Card Info: VISA / MC / AMEX / Discover (circle one)

Card Number: _____

Expiration Date: _____ CVV #: (back of card) _____

Charge Amount: \$ _____ Signature: _____

Please make checks payable to: **NCDPAF**

Visit our website at ncdpaf.org

THANK YOU!

P.O. Box 2291, Paso Robles, CA 93447

805-610-7570

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