



**Clark State Performing Arts Center
Circle of Friends**

MEMBERSHIP FORM

(Please Print)

Join the Circle of Friends and help to preserve our cultural heritage by providing support for the many educational and artistic programs presented at the Clark State Performing Arts Center – Your Home for the Arts!

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Telephone: (____) _____ (____) _____
Home Work

E-mail: _____

Levels of Giving (Please check one)

- Angel** \$1,000 or more
- Executive Producer** \$500+
- Producer** \$250+
- Director** \$100+
- Star**..... \$50+
- Entertainer**..... \$25+

Method of Payment

Check Enclosed (Made payable to Clark State Community College)

VISA MasterCard Discover

Charge Amount: Full Quarterly

Cardholder's Name _____

Card Number _____ Expiration Date _____

Signature _____

**Please print and mail with payment to:
Clark State Performing Arts Center, PO Box 570, Springfield, OH 45501**

Remember, your contribution is tax-deductible. The deductible portion of your gift is based on full use of the benefits offered. Some corporations match their employees' contributions to non-profit organizations. If your employer is such a corporation, please request your contribution to the Clark State Performing Arts Center be matched.

For more information, please contact our Administrative Office at 937-328-3841. Thank you.