

**YES, I WILL SUPPORT THE LEWISTON CIVIC THEATRE!**

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Employer / Business: \_\_\_\_\_ Position / Title: \_\_\_\_\_

Business Address: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Personal or Business name as you wish it to appear: \_\_\_\_\_

**SPONSORSHIP LEVELS**

What level would you like to sponsor?  
Please select:

<input type="checkbox"/> Concession (\$250)	<input type="checkbox"/> Media (\$350)	<input type="checkbox"/> Bronze (\$500)
<input type="checkbox"/> Silver (\$1,000)	<input type="checkbox"/> Gold (\$1,500)	<input type="checkbox"/> Platinum (\$3,000)

Which show would you like to sponsor?  
Please select:

<input type="checkbox"/> Shrek Jr.	<input type="checkbox"/> Dracula	<input type="checkbox"/> Annie
<input type="checkbox"/> Steel Magnolias	<input type="checkbox"/> Oklahoma	

I/We have enclosed a gift of \$ \_\_\_\_\_

I/We pledge an additional \$ \_\_\_\_\_ balance to be paid (date) \_\_\_\_\_ or by May 30.

**METHOD OF PAYMENT**

Please select one:  Invoice - Online Payment  Contact Us  Cash  Check

Signature: \_\_\_\_\_

Please make checks payable to  
Lewiston Civic Theatre.  
If you have any questions, please call the Box Office at  
208-746-3401 or e-mail [operations@lctheatre.org](mailto:operations@lctheatre.org)

**LEWISTON CIVIC THEATRE**  
PO BOX 1697  
Lewiston, ID 83501

