



# DONATION FORM

Name \_\_\_\_\_

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Gift amount: \$ \_\_\_\_\_

Sustaining Gift:  Monthly  Quarterly  Other: \_\_\_\_\_

Method:  Check enclosed  Visa  Mastercard  American Express  Discover

Credit Card No. : \_\_\_\_\_ CW: \_\_\_\_\_ Exp. : \_\_\_ / \_\_\_

Name on card: \_\_\_\_\_

I would like to be recognized in the house program as follows *(for gifts of \$250 and more)*:

\_\_\_\_\_

My gift is in  honor/  memory of: \_\_\_\_\_

Please send an acknowledgement to:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature

Date

Go green! Donate online at [www.floridaorchestra.org](http://www.floridaorchestra.org)

Or, please send this completed form and your donation to:

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