

I/we are pleased to support Great Waters



DONOR INFORMATION

Name(s) _____

Primary Address _____
STREET/PO BOX CITY STATE ZIP

Secondary Address _____
STREET/PO BOX CITY STATE ZIP

Email _____ Home Phone _____ Mobile _____ Business _____

RECOGNITION

Donors will be recognized in all campaign materials unless an anonymous gift is requested. Please use the following name(s) in all acknowledgments: Signature of donor(s) _____
_____ Date _____

PLEDGE INFORMATION

I/we will contribute a total of \$ _____
cash or assets to Great Waters.

I/we wish to have our payments spread equally over:
() 1 year () 2 years () 3 years

Please invoice me/us beginning _____
and thereafter: () Monthly () Quarterly () Annually OR
() Other: _____

LEGACY GIFT

- () I/we have left Great Waters in my/our estate plans.
() I/we would like to speak with someone about leaving Great Waters in my/our estate plans.

CONTRIBUTION INFORMATION

I/we plan to make my/our contribution in the form of:

() Cash or Check () Debit/Credit Card () Stock

() Donor Advised Fund OR

() Other: _____

Please charge my credit card (circle one):

Amex / Visa / MC / Discover

Number: _____

Exp: _____ CVV: _____

Authorized Signature: _____

Please return to executivedirector@greatwaters.org
For questions please call the Great Waters office: (603) 569-7710

Thank you for your generous support to bring entertainment to the Lakes Region.

Great Waters Music Festival • Box 488, 54 N. Main St. • Wolfeboro, NH 03894 • GreatWaters.org