



Contribution Form

Name _____ Date _____

Company/ Organization _____

Preferred Address _____

City _____ State _____ Zip _____

Preferred Contact (*Please Check One*): Telephone _____ Email _____ US. Mail _____

Daytime Phone _____ Evening Phone _____

Email _____

My tax-deductible contribution to the Saint Paul Conservatory for Performing Artists is:

- \$10,000 \$5,000 \$2,500 \$1,000
- \$500 \$250 \$100 Other
\$ _____

In-kind goods or services: _____

My tax-deductible contribution will be in the form of:

- Check** – Check is enclosed (please make check payable to “Saint Paul Conservatory for Performing Artists”).
- Securities** – Please contact me with disposition instructions.
- Pledge** – I will pay over 1 2 3 years

I would prefer my gift to be recognized anonymous

Please let us know if your company/employer has a matching gift program.

Please mail completed forms to: Saint Paul Conservatory for Performing Artists
16 W 5th Street
Saint Paul, MN 55102