CONTRIBUTION & FAMILY MESSAGE FORM

Dear Parents, Friends & Supporters of Theatre Ink: Theatre Ink, Newton North High School’s Teaching and Working Theatre, has an ambitious program of 10 exciting productions for the 2016-2017 school year. More than 250 students participate each year in all aspects of the Theatre Ink production process. As a self-sufficient program, Theatre Ink depends upon contributions, sponsors and ticket sales to assure continued excellence. Please consider creating a tribute for your favorite actor, production or stage crew member and/or make a Theatre Ink, contribution to support our students and the great work of the Theatre Ink program. Thank you in advance for your support!

Celebrate & Congratulate

Your favorite actor, techie, crew member, musician or show with a personal tribute.

- Full Page........ $100
- Half page......... $ 50
- Quarter Page... $ 35

Which production(s)
__________________________________________________________

Your Message:
__________________________________________________________
__________________________________________________________
__________________________________________________________

Please also email the text of your message to: jill.bennett1@gmail.com, with “Theatre Ink Family Message” in the subject line by JANUARY 15th 2017.

Note: If you are selecting the full page option only, you may submit a photograph and/or a camera ready ad.

Program book pages are 5.5” w x 8.5” h with 3/8” margin (portrait)

Make a Contribution

And your name will be listed in the Theatre Ink Program Book.

- Benefactors ($100 or more) $ ________
- Patrons ($50—$99) $ ________
- Friends ($35—$49) $ ________

Please print your name exactly as you would like it to appear in the book:
__________________________________________________________

Check here if you would prefer your contribution to remain anonymous.

Please provide contact and payment information:

Name: _____________________________________________
Email: _____________________________________________
Address: ___________________________________________
__________________________________________________________
__________________________________________________________

Student(s) name: _________________________________

Amount Enclosed: $ _____________

Program Message: $ _____________

Contribution: $ _____________

Total Amount Enclosed: $ _____________

Make your tax deductible check payable to “Theatre Arts Opportunity Committee, Inc.” and mail it along with a completed form to Kathy Seltzer at: 15 Bigelow Terrace, Newton, MA 02458 by JANUARY 15th, 2017.

Questions – email Kathy Seltzer, kiseltzer@comcast.net or Jill Bennett, jill.bennett1@gmail.com