



**YES! I WOULD LIKE TO SUPPORT NCTC.**

- \$2,500  \$1,000  \$500  \$250  \$100  \$50  Other \$ \_\_\_\_\_
- Enclosed is my check payable to: **New Conservatory Theatre Center**
- Charge my credit card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Sec. Code: \_\_\_\_\_
- Make my gift a recurring donation of \$ \_\_\_\_\_ (\$10 minimum payment per month) each  month/ quarter (*check one*) until \_\_\_\_\_. (*enter date*)

**OTHER WAYS TO GIVE**

- My employer has a matching gift program; the appropriate forms are enclosed.
- Please send me information on giving appreciated stock to NCTC.
- Please send me information on remembering NCTC in my estate plans.
- I have included NCTC in my:  Will  Insurance Policy  Retirement Plan

**CONTACT INFORMATION**

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

How would you like your name to appear in promotional materials (if different from above)?  
\_\_\_\_\_

- Please make my gift anonymous.

**RETURN THIS FORM TO:**

**NEW CONSERVATORY THEATRE CENTER**  
Attn: Andrea Partridge, Development Manager  
25 Van Ness Avenue, Lower Level  
San Francisco, CA 94102

***NCTC is a 501(c)3 nonprofit organization and your contribution is tax-deductible as allowed by law. Thank you for your support!***