



Yes! I would like tickets to Hallelujah for Handel

YOUR TICKET REQUEST (general seating):

_____ # of tickets requested for Sat., May 14 at 8:00 PM X \$10.00 = _____
.....

YOUR INFORMATION

Name: _____

Email: _____

Phone Numbers (as applicable):

Mailing Address: _____

Home: _____
Cell: _____
Work: _____
Other: _____

Email addresses, phone numbers and personal information are for CVAE internal use only. The information will not be shared with outside organizations and is requested for purposes of contribution handling and future concert communications only.

Yes! I would like to support Carolina Vocal Arts Ensemble

Please consider the following available levels of support and sponsorship:

Levels of Yearly Contribution:

- \$5,000 Maestro
- \$2,500 Benefactor
- \$1,000 Conductor's Circle
- \$500 Singer's Circle
- \$250 Orchestral Circle
- \$100 Patron
- \$50 Friend

Levels of Concert Sponsorship:

- \$15,000 Full Concert Sponsorship
- \$10,000 Orchestral Sponsorship
- \$7,500 Solo Artists Sponsorship

Other Donation (please specify amount):

.....

Name: _____

(as you wish to be listed in our concert program - e.g., Bob and Jane Smith) or I wish to remain anonymous.

OR My contribution is: In Honor of In Memory of the person(s) named below:

.....

MATCHING GIFTS

My company will fully/partially match my contribution. Company Name: _____

Please return this form by email or U.S. Mail to:
2840 S College Road #247, Wilmington, NC 28412
Tickets@CarolinaVocalArts.org | 910.960.SING (7464)

For Office Use Only:

Date Received	Donation Acknowledged	Patron Contacted
_____	_____	_____