

Yes!

I would like to contribute to the Evanston Art Center at the following level:

- Individual (\$45) \$ _____
- Family/household (\$55) \$ _____
- Senior/YFA (\$30) \$ _____
- Business Contributor (\$100) \$ _____
- Patron of the Arts (\$50-\$149) \$ _____
- Benefactor (\$150-\$249) \$ _____
- Sponsor (\$250-\$499) \$ _____
- Affiliate (\$500-\$999) \$ _____
- Visionary (\$1000-\$4999) \$ _____
- Medici Circle (\$5000 and up) \$ _____

Sponsor A Child

I would also like to sponsor a child or children in EAC's outreach program (\$25 per child) _____ X \$25 =

\$ _____

Tribute Gift

I would like to make a contribution of \$500 or more in honor of

Name

in the amount of

\$ _____

MY TOTAL CONTRIBUTION TO THE EAC:

\$ _____

Name

Address

City

State

Telephone

E-mail

Please return this form to the Evanston Art Center office with your check made payable to the Evanston Art Center, 2603 Sheridan Road, Evanston, IL, 60201 or pay by credit card:

Visa Mastercard

Card No.

Expires

Signature

Date

- My company has a matching gift program. I will direct the gift form to the Evanston Art Center.
- I wish my gift to be anonymous.
- Please call me about program sponsorship or planned giving.