



CHANGING FACES THEATER COMPANY

P.O. Box 1868 LODI, CALIFORNIA 95241
(209) 747-8043 WWW.CHANGINGFACESTHEATER.ORG
TAX I.D.#76-0718614

Student Fee Payment Form

Cast Member's Name _____

NON-REFUNDABLE Fee: \$175.00

Date Due: Saturday, June 5, 2010

Make checks payable to CFTC. Remember, your total payment (student fee plus any additional donation) is tax-deductible, so please keep the receipt at the bottom of this form. Mail the top part of this form along with payment to the P.O. Box address listed above. Please note our sponsorship levels as listed below:

PATRON **\$1,000**

- 1 TABLE (8 SEATS) AT DINNER SHOW PERFORMANCE
- HALF PAGE AD INSIDE PROGRAM
- PATRON LISTING IN PROGRAM

CONTRIBUTOR **\$500**

- 4 TICKETS TO A DINNER SHOW PERFORMANCE
- QUARTER PAGE AD INSIDE PROGRAM
- CONTRIBUTOR LISTING IN PROGRAM

FRIEND **\$100**

- 2 TICKETS TO A DINNER SHOW PERFORMANCE (A \$70 VALUE)
- FRIEND LISTING IN PROGRAM

SUPPORTER **UP TO \$99**

- SUPPORTER LISTING IN PROGRAM

Amount Paid: \$ 175.00

Additional Donation: \$

Total Amount Paid: \$

Changing Faces Theater Company
Tax I.D. # 76-0718614

Total Donation Amount: \$

Date: _____