

THEATRE FOR A NEW AUDIENCE

Yes! I want to support Theatre for a New Audience's productions and New Deal program as a Member of the Young Patrons Association

DONOR INFORMATION

Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____ Email: _____

I have chosen my giving level*:

☐ **\$500 Young Associates** *Fully tax-deductible*

- *Tickets:* Access to up to two (2) discounted tickets per production; \$20 (plus fees) for New Deal eligible audiences, \$45 (plus fees) for all others (regular full-price tickets are \$95-\$125).
- *Invitations* for two to Young Patrons events.
- *Gala:* Access to buy up to two (2) \$500 discounted tickets to TFANA's Annual Spring Gala Celebrating Shakespeare's Birthday (regular full-price tickets starting at \$2,000).
- *Broadway Nights:* Access to up to two (2) \$1,000 tickets (regular \$1,250) to TFANA fundraiser nights on Broadway and at other shows with post-show receptions with artists and creatives.
- 10% discount at the Daniel and Joanna S. Rose Book Kiosk

☐ **\$750 Young Patrons** *Fully tax-deductible*

All of the above benefits plus:

- *Special Receptions:* Invitation to Annual Producers Circle reception event in a private home celebrating our productions with artists and creatives.

☐ **\$250 New Deal Associates**

Introductory offer: Young Patrons 30 and younger can still purchase New Deal tickets for \$20 (ID required for each ticket holder) but enjoy all the event benefits of a Young Associates membership for the introductory price of \$250/year.

☐ Other Amount _____

☐ I want to join the Young Patrons Table at the Annual Spring Gala on Monday, April 27

____ **\$500 Young Patrons Ticket**

Enrolled Young Patrons may purchase up to two (2) \$500 tickets. Regular, full-price tickets start at \$2,000. All but \$360 per ticket is tax-deductible.

Payment Method:

☐ I have enclosed a check written out to: Theatre for a New Audience

Please write Young Patrons Association in the memo.

☐ Please charge my (please circle): Visa MasterCard American Express Discover

Credit Card # _____ Exp. Date. _____

Sec Code _____ Signature _____

☐ My company has a Matching Gift program, please check with your company for the appropriate forms.

Company Name _____

Please return this form and your payment to:

Theatre for a New Audience

Attn: Development Office

154 Christopher Street, Suite 3D

New York, NY 10014

For more information, please contact Sara Billeaux, Associate Director of Development, sbilleaux@tfana.org. Theatre for a New Audience is a 501 (c)(3) organization (FEIN: 13-3059081). Thank you for your generous support!