



ADOPTION PAPERS: JOIN OUR FAMILY!

EXTENDED FAMILY

I know that it 'Takes A Village' to support new plays, and recognize how important that is!

IT TAKES A VILLAGE \$ _____ amount to \$100

FAMILY FRIEND \$ _____ amount to \$250

FAMILY MEMBER

I want to share responsibility with the close family and get into the process!

FAVORITE COUSIN \$ _____ amount to \$500

FUN AUNT / UNCLE \$ _____ amount to \$1000

IMMEDIATE FAMILY MEMBER

I want to share joint custody, and get private quality time with the playwright & play of choice!

BIG SISTER/BROTHER \$ _____ amount to \$4,999

SOLE ADOPTIVE PARENT(S) \$ _____ As far as you want to go!

*Please contact us if you would like to become a **multi-year** or **monthly** donor! (415) 626-2176*

*Your gift is tax deductible to the full extent permitted by law. *Necessary Information to process Credit Card Gifts. Thank you!*

*Name: _____

*Address: _____

*Phone: _____ *Email: _____

Card Type: Visa MasterCard American Express

*Card Number: _____ *Expiration: _____ *CVS# _____

*Name on the card: _____

All above information is strictly confidential and will be destroyed after processing. We must have zip code, exact name on card & CVS to process

Please make checks payable to: **"Playwrights Foundation"**

➔ **IF NOT NOW...WHEN?:** If this month is tight but you would still like to help PF, just let us know the date(s) and amount(s) and we will gratefully accept your credit card gift any time of year! Example: "Please charge my card \$300 on 1/17/12, 3/17/12, and 5/17/12."

Please charge my card \$ _____ on the following date(s) _____

➔ **MATCHING GIFTS:** Does your company match charitable donations? Contact your Human Resources Department and they can help you double your gift to PF!

THANK YOU – We count on your partnership to co-create the theater of tomorrow!