

YES, I WILL SUPPORT THE LEWISTON CIVIC THEATRE!

Name: _____
 Title: _____
 Contact Phone: _____
 Email: _____
 Employer / Business: _____
 Address: _____
 Name as you wish it to appear in marketing: _____

SPONSORSHIP LEVELS

What level would you like to sponsor?

Bronze \$500/show Silver \$1,000/show Gold \$1,500/show Platinum \$3,000/show Diamond \$15,000/season

Which show(s) would you like to sponsor?

Full Season (6 shows) OR Children's Summer Show Season Opener Christmas Show
 Vineyard Show Spring Show Season Finale

Total Sponsorship \$ _____

METHOD OF PAYMENT

Please select one: Online Payment Cash Check Contact us

Signature: _____

Please make checks payable to
 Lewiston Civic Theatre.
 If you have any questions, please call the Box Office
 at 208-746-3401 or e-mail
 operations@lctheatre.org

LEWISTON CIVIC THEATRE
 PO BOX 1697
 Lewiston, ID 83501

