



2017-18 Annual Fund Commitment Form

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Phone: _____

Email: _____

Please accept my contribution of: \$ _____

Donor Recognition and Benefits

I would like to be recognized as a: Classical donor POPS donor

would like my name to appear in official print recognition as: _____

would prefer my giving to be anonymous

decline all benefits with a fair market value making my gift 100% tax deductible as allowed by law

Choose Your Payment

Check: made payable to the Houston Symphony.

Online: houstonsymphony.org/donate

Text: MUSIC to 41444

Credit Card:

American Express

MasterCard

VISA

Discover

Credit Card No: _____ Exp. Date _____

Name on Card: _____

Pledge: please send me invoice for payment by (date) _____.

Confirm and Return Form to Houston Symphony

Signature _____ Date _____

Mail: Houston Symphony, 615 Louisiana Street, Suite 102, Houston, Texas 77002 **Fax:** (713) 333-9501
Contact Tiffany Bourgeois at (713) 337-8559 or tiffany.bourgeois@houstonsymphony.org with any questions.

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