

Donor Form

Please print and fill out the form below, and bring it with you to the next show, or mail it to us.
Please make all checks payable to: **Community Actors Theatre**

Mail to: Community Actors Theatre
2957 54th St.
San Diego, CA 92105

Name: _____ Date: _____

Address: _____ Zip: _____

Telephone Number: _____

Amount of Donation: _____

*Please circle the category you're signing up for.

1.Member: \$30.00 – 100.00 - _____

2.Contributor: \$ 101.00 – 200.00 - _____

3.Silver Donor: \$201.00 – 500.00 - _____

4.Gold Donor: \$501.00 – 1,000.00 - _____

5.Benefactor: \$1,100.00 – 9,000.00 - _____

6.Super Benefactor: \$10,000 or more - _____

Signature: _____

We thank you from the bottom of our hearts!!!!
(You will receive a thank you letter for your donation.)