



THE MISSION of The Circus Arts Conservatory is to engage and educate students using unique and innovative learning programs; to measurably improve the quality of life for individuals in care facilities; and to advance the extraordinary legacy and heritage of the circus.

I WOULD LIKE TO MAKE A DONATION GIFT OF:

\$1,000 \$500 \$250 \$100 \$50 \$25 Other \$ _____

I would like to pledge \$ _____ per year for _____ year(s)

From my Donor Advised Fund _____

This Gift is in Memory of:

This Gift is in Honor of:

Designate gift to:

- Area of Greatest Need Sailor Circus Academy
 The Education Program Humor Therapy Program

PRINT YOUR CONTACT INFORMATION

Name: _____
(Print as you wish to be recognized)

Business/Organization: _____

Address: _____

Email: _____

Phone: _____

PAYMENT INFORMATION

Check is enclosed, made payable to **THE CIRCUS ARTS CONSERVATORY**

Credit card: Visa MC AMEX Discover

Credit Card No.: _____

Exp. Date: _____ CVC# _____

Name on card: _____

Billing Address & Zip Code: _____

Contact me about making The Circus Arts Conservatory a part of my estate planning

My company, _____ will match my gift

I want to pay with stock, please contact me

I have included The Circus Arts Conservatory in my estate planning