

# Support the Peninsula Players

## *Annual Fund Contribution Form*

Name \_\_\_\_\_

Name as you would like it to appear in our program \_\_\_\_\_

Name of Spouse \_\_\_\_\_

Address 1 \_\_\_\_\_

Address 2 \_\_\_\_\_

City/Town \_\_\_\_\_

State & Zip \_\_\_\_\_

Daytime Phone Number (include area code) \_\_\_\_\_

Fax Number \_\_\_\_\_

Email address \_\_\_\_\_

Enter the amount of your donation in dollars & cents \_\_\_\_\_

*Credit Card Information:*

Name as it appears on Credit Card \_\_\_\_\_

Credit Card- (Mastercard or Visa) \_\_\_\_\_

Number \_\_\_\_\_

Expiration date \_\_\_\_\_

*All contributions are 100% tax deductible. Thank you!*

Please mail your Contribution in with this Donation Form to:

Peninsula Players,  
W4351 Peninsula Players Road  
Fish Creek, Wisconsin 54212

920-868-3287