

I'd like to support **CATCO** through my donation to the Annual Fund.

Name _____

Street Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

Name/s as you wished to be recognized: _____



Theatre is a shared experience that illuminates the mysteries of our humanity. Its magic has power to transform us whether on stage, in the classroom, or in our diverse communities. CATCO creates theatre that delights, challenges, and transports.

Send notifications to: CATCO Development, 55 East State Street, Columbus, OH 43215, or fax at 614-719-6703. If you need additional information, please call 614-719-6614.

Giving options:



My check for \$_____ is enclosed, payable to CATCO.

I wish to make a pledge of \$_____ to be paid by _____.

Check here if you wish to receive an invoice for payment from CATCO.

Please charge my contribution of \$_____ to my: (circle one) MC Visa Amex Discover

One-time gift. Recurring gift* to be charged monthly.

Card Number _____ Exp. Date _____

Signature _____ today's date _____

I wish for my gift to remain anonymous.

I have included my employer's matching gift form.

My gift is in honor/memory of: _____

*Recurring gifts will be charged on the 15th of each month. Gifts with no end date will remain in effect until CATCO receives written notification of termination.