



TAKE A SEAT!

Fundraising Campaign for Performing Arts Programs

OUR GOAL

To raise funds to benefit the Performing Arts programs at the South Williamsport Jr/Sr High School by soliciting sponsorships of the new auditorium seats. Donors will be recognized through an engraved nameplate that is attached to the chair, with a personalized inscription. The funds raised will be available in the form of an unrestricted grant to the Band, Chorus, and Theater programs.

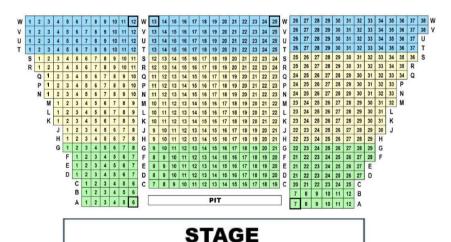
SPONSORSHIP LEVELS











KEY	
Producer	\$350
Director	\$250
Rising Star	\$150
Handica	Seating

Questions? Email us at foundation@swasd.org

FREQUENTLY ASKED QUESTIONS

Q: May I specify a name other than my own?

A: Yes. You may use this opportunity to honor someone you admire or want to be remembered. The nameplate can be engraved using 3 lines with up to 25 characters per line. Remember – a space or punctuation mark counts as a character.

Q: Will my message actually appear on the seat?

A: Yes. Each sponsored seat will have an engraved nameplate affixed to the arm.

Q: Are gifts tax deductible?

A: Yes. The South Williamsport Education Foundation is a 501(c)(3) non-profit organization and all gifts are tax-deductable.

Q: Is the seat reserved for my use at future events.

A: No. You are sponsoring the seat and your name or message will be affixed to the chair, but this does not reserve seating for any events or performances.

Q: What if I don't want to sponsor a seat but would like to make a donation in support of the Performing Arts programs?

A: Join our stage crew and make a donation of your choice.

TAKE A SEAT!

Full Name	:							
Full Address	:							
City/Country	<i>t</i> :							
Email	:				Phone Nun	nber :		
Please list your n like to be listed a	s a s	ponsor						
YES, I would I School Audit			AT at the So	outh W	Villiamsport	Area Jr./	Sr. High	
Producer (\$350) Director (\$250) Rising Star (\$150) Stage Crew (any) PRINT your plaque dedication EXACTLY as you would like it to read. Character limit per line is 25 characters (including spaces)								
Line 1 Line 2 Line 3								
Section/Seat Request We will do our best to honor each request.								
Payment Info	orm	ation 🔲 Cı	redit Card		Check			
Credit Card #	:							
Name on Car	d:			Exp:		CSC:		
Please make checks payable to The South Williamsport Education Foundation. Checks should be mailed to 515 West Central Ave. South Williamsport, PA 17702								
Please let us kr	ıow	if any of the foll	lowing apply	and we	e will contact y	ou.		
I am intere	este Fou	matches gifts to d in volunteering Indation progro may be interes	ng to help witl am.	h "Take	A Seat" or and	other South	n Williamspo	rt