



Donation/Pledge Form

Donor/Company Name: \_\_\_\_\_  
*Please print name as you would like it to appear for public recognition*

Contact Name (if different): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

In support of Theatre Under The Stars **JUST IMAGINE** Capital Campaign,  
I/we pledge a total gift of \$\_\_\_\_\_, payable over \_\_\_\_\_ years (1 to 5 years maximum).

This gift will be made in the form of:  Check  Credit Card  Marketable Securities  In-Kind

Description of In-Kind donation: \_\_\_\_\_

AMEX Visa MasterCard Number: \_\_\_\_\_ Exp. \_\_\_\_\_

**Installment pledge payments** (if applicable): We request that gifts of \$5,000 or less be paid in two years, and gifts of \$25,000 or more may be pledged up to five years.

Year One: \$\_\_\_\_\_ to be paid on or about \_\_\_\_\_

Year Two: \$\_\_\_\_\_ to be paid on or about \_\_\_\_\_

Year Three: \$\_\_\_\_\_ to be paid on or about \_\_\_\_\_

Year Four: \$\_\_\_\_\_ to be paid on or about \_\_\_\_\_

Year Five: \$\_\_\_\_\_ to be paid on or about \_\_\_\_\_

Pledge reminders will be sent unless otherwise requested.

We are interested in a naming opportunity: \_\_\_\_\_

This gift is anonymous. No donor recognition requested.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for your commitment to Theatre Under The Stars **JUST IMAGINE** Capital Campaign.  
Please make your check payable to **Theatre Under The Stars** and return this form to:  
TUTS Development Department, 800 Bagby, Ste. 200, Houston, TX 77002.  
If you have any questions contact Carol Thornburg, 713-558-2647, [carol@tuts.com](mailto:carol@tuts.com).