



Well Wisher Form

Cast/Crew/Board Member \_\_\_\_\_

Well Wisher name \_\_\_\_\_

Well Wisher email \_\_\_\_\_

Well Wisher phone \_\_\_\_\_

For which production

- checkbox Fall Junior Production
checkbox Summer Family Production
checkbox Winter Adult Production or Cabaret

Ad options ~ 5"x8" program page:

Single line option (approx. 20 words or less) - \$15.00

Message: \_\_\_\_\_

Table with 2 columns: Ad Type, Price. Rows: 1/4 page (\$50.00), half page (\$75.00), full page (\$100.00)

Table with 2 columns: Ad Type, Price. Rows: 1/4 page (\$100.00), half page (\$150.00), full page (\$200.00)

- All forms and payments are due 3 weeks before the production opens
- Make checks payable to Center Stage Theatre with "well wisher" noted in the memo line
- Venmo payments can be made to @centerstagetheatreofkzoo
- Please note your name or your business name, cast member name, and your add type choice
- Please return this form & payment to a CST company member or by mail to:
Center Stage Theatre
PO Box 128
Comstock, MI 49041

Please email the text & a PDF or JPEG of the photo you would like included (for all but single line options) to:

cstkmarketing@gmail.com

Please note "well wisher" with cast member name in the subject line. Thank you!

Thank you for supporting your local community theatre!

Contributions to Center Stage Theatre are tax-deductible!

We are a 501(c) (3) non-profit organization. Federal Non-Profit #37-1458709

Internal use only
Paid Check-check no:
Cash
Credit/Debit Card
Venmo
Added to program