

ALVIN AILEY AMERICAN DANCE THEATER

Honorary Gift

This gift is in honor of _____
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Gift Amount \$ _____ On the occasion of _____

Gifts of \$400 or more will be recognized in our programs.

Please use my contribution for: General Operating Scholarship Arts in Education
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Payment Information

Enclosed is my check made payable to: **Alvin Ailey Dance Foundation, Inc.**

Please charge \$ _____ to my: American Express Master Card Visa

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Billing Information

TITLE FIRST NAME LAST NAME

STREET, APT # CITY STATE ZIP CODE

PHONE EMAIL

Gift Recipient Information

TITLE FIRST NAME LAST NAME

STREET, APT # CITY STATE ZIP CODE

PHONE EMAIL

Mail completed form along with your payment to:
The Joan Weil Center for Dance, 405 West 55th Street, New York, NY 10019 Attention: Membership Office
Please call our Membership Office at (212) 405-9033 with any questions.