



Complete and return to:
200 Northgate Avenue, Daly City, CA 94015
artistsinmotionba@gmail.com
(650) 273-6246

GIFT FORM

Your Name: _____

Address: _____

Tel No: _____ e-mail: _____

Amount:

- _____ **Friends of AIMBA** - \$10 - \$149
- _____ **Juniors Circle** - \$150 - \$299
- _____ **Apprentice Circle** - \$300 - \$499
- _____ **Company Circle** - \$500 - \$999
- _____ **Principal Dancer Circle** - \$1,000 or more

Check one:

Please send the tickets to: _____

I am Gifting the full amount. Please do not send me the tickets.

Form Of Payment:

___ Check (Please make check payable to: **AIM Bay Area**)

___ Credit Card - if you prefer, the following information may be called in to (650) 757-1244

___ Visa ___ MC

Account Number: _____

Exp Date: _____ (mm/yy) Security Code: _____

Name of Cardholder: _____

Billing Address: _____ Billing Zip Code: _____

The above donation is for:

- General Fund
- Nutcracker Production
- Musical Theatre Production
- Scholarship Fund
- Other: _____