



CHStage Supporting Cast Foundation

22500 Wims Road
Clarksburg MD 20871
www.chstage.org

Non-Profit Federal Tax ID # 80-0688562

SHOUT OUT FORM:



Select Ad Size:

Select Show:

<input type="checkbox"/> FULL-PAGE	<input type="checkbox"/> FALL SHOW (\$75)	<input type="checkbox"/> SPRING SHOW (\$75)
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<input type="checkbox"/> QUARTER-PAGE	<input type="checkbox"/> FALL SHOW (\$25)	<input type="checkbox"/> SPRING SHOW (\$25)

Sponsorship Level

- | | |
|--|--|
| <input type="checkbox"/> <i>Platinum Sponsor</i> | (\$1,000 or more) - includes five tickets and backstage tour for both shows. |
| <input type="checkbox"/> <i>Directors Circle</i> | (\$500 - \$999) - includes five tickets to both shows |
| <input type="checkbox"/> <i>Benefactors</i> | (\$250 - \$499) - includes four tickets to both shows |
| <input type="checkbox"/> <i>Angels</i> | (\$150 to \$249) - includes three tickets to both shows |
| <input type="checkbox"/> <i>Stars</i> | (\$100 to \$149) - includes two tickets to both shows |
| <input type="checkbox"/> <i>Patrons</i> | (\$50 to \$99) - includes two tickets to either show |
| <input type="checkbox"/> <i>Supporters</i> | (all donations welcomed) |

Method of Payment:

Form of Payment:

Cash ☐

Check ☐

**Please make checks payable to CHStage Supporting Cast*

*Return by **October 15th** for Spring Shows and **February 23rd** for Fall Shows*

Name: _____

Address: _____

Phone: _____

Email: _____

Please complete this form and send with payment to:

Clarksburg High School
Attention: Michelle Meyer
22500 Wims Road
Clarksburg, MD 20871

OR

Send an email to ads@chstage.org to arrange a personal pickup of the form and payment.

Please send all electronic ad copy to ads@chstage.org

