

## **MEMBERSHIP APPLICATION – 2024-25 SEASON**

## Thank you for your interest in the Pacific Symphony League!

First Name	Last Name	Title (Pl	ease circle):	Mr. Mrs. N	VIs. Dr.	
Street				Apt		
City		State	Zip_			
Phone: Home	Cell	Text OK?	YES	or	NO	
E-Mail		Birthdate: N	/lonth	Day	/	
(Please check your	of membership with the following benefic desired level. Please note that event f r <b>\$75/year</b> * OR Add 2nd H	ees are additional.)	ember for \$	50/year m	ore	
<ul> <li>Free con</li> <li>After 6 h</li> <li>Invitation</li> <li>Interact v</li> <li>PATRON MEMI (Volunte</li> <li>All the be</li> <li>SYMPHONY PA</li> <li>All the be</li> <li>2 concer</li> <li>A unique</li> </ul>	ship pin the 1st year ocert ticket and reimbursed parking whe ours of volunteer service, 1 concert vou only opportunity to purchase tickets for with Symphony President, Music Direct <b>BER \$200/ year</b> * OR Add 2nd tering welcome, but not required) enefits of active members Please Check to be contacted for Volu ARTNER \$500/ year (Volunteering welcome) enefits of patron members PLUS t tickets for a special performance and e Pacific Symphony branded sweatshirt	ucher good for 2 cond or special brunches/lu tor, Musicians, and St <b>Household Patron M</b> unteer Opportunities a come, but not require occasional ticket disc	cert tickets incheons/di taff <b>Member for</b> as a Patron d) counts	nners <b>\$175/yea</b> Member	r more	
NO. Please do no All memberships and con deductible. Pacific Symp with an additional donat	d like to have your information and option the deadline to submit your for t include me in the membership director <u>Additional DONATIO</u> ntributions are tax deductible to the exten- bhony Tax ID #95-3635496. I would like tion in addition to my membership of <b>\$</b> teague members needing dues help with	rm is <u>September 1, 202</u> ry (check if desired). <u>ON (Optional)</u> ent allowed by law. Fe e to support the efforts	es for Leagu of the Pacif	ie events ai ic Symphor	re not tax 1y League	
	PAYMENT M	<u>ETHOD</u>				
		Check Enclosed (Pay			• •	
	ship plus Optional Donation) \$					
Signature		Expiration Date	Dat	e		
	PLEASE RETURN THIS FORM V Pacific Symphony, AT 17620 Fitch, Suite 100	TN: Development	ENT TO:			

www.PacificSymphony.org/League