

# Your PLEDGE

## Visionary Dance Productions Sponsorship Agreement

I think this is a marvelous program. Sign me up!

I, \_\_\_\_\_ (full name)  
have fully read and understand and agree with the terms described.

I pledge to support Visionary Dance Productions with no less than \$150, or the designated monetary amount below, each month for one year. I am honored that my pledge along with the other Golden Patron pledges that ensures the studios stays open for business and entitles me to the dance benefits described for the full year:

From Date: \_\_\_\_\_(Month/Year) for 12 months, until \_\_\_\_\_(Month/Year)

✓Choose one Position:

**Golden Dome Member**

\$5000 or more in one sum: \$ \_\_\_\_\_  
OR divided per month: \$ \_\_\_\_\_

**Foundation Member (\$5 a Day)**

\$150 per month, one year benefits  
Monthly amount to be billed or charged

**Capitol Member (\$6 a day)**

\$180 per month, one year benefits  
Monthly amount to be billed or charged

**Long Distance Supporters**

\$150 per month 1 year commitment  
Monthly amount to be billed or charged

Signature \_\_\_\_\_ Date \_\_\_\_\_

Other Ways to Contribute:

**Corner Stone Donation** (One time Gift)

While I cannot take full advantage of this opportunity at this time, I would like to make a gift to show my appreciation of the studio's good work. (Does not include classes nor benefits.)

Write One time Gift Total \$ \_\_\_\_\_

**Come to Class!** (please register or at the studio)

**Your Pledge monthly responsibility and fee:**

If you chose monthly payments, the amount will be:

- charged automatically to your credit card each month
- paid by check
- paid cash

Payments are due five days before the end of each month. (\$25 fee for any returned checks). It is understood if you are not able to make classes because of scheduling or other life situations the fee still applies. This is your pledge to the studio. If you must break the contract we need one month's (30 days) written notice during which time your pledge is still expected. Please work with us to find a donor/dancer to replace your Golden Patronage. We need an ongoing for the studio to remain open to serve our dance community.

(Fill up both pages)

## ***Payment & Personal Information***

Printed Name: \_\_\_\_\_

Golden Patron Status Position \_\_\_\_\_  
Confirm \$ \_\_\_\_\_ monthly payment

- I will pay by Check or Cash each month
- Please charge my credit card between the 1st -5th of each month;  
from \_\_\_\_\_ (Month/Year) to \_\_\_\_\_ (Month/Year)
- Please charge my credit card with a One Time Donation of: \$ \_\_\_\_\_

Signature: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_  
\_\_\_ VISA \_\_\_ MC

Expiration date (mm/yy): \_\_\_\_\_ Code on back: \_\_\_\_\_

Full Name on the Card: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

How do you want your name mentioned on studio plaque?

Name Credited: \_\_\_\_\_

Donors can be recognized as anonymous if they wish

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### **Sponsor a dancer**

If you would like your benefit package to go to someone else please fill up this section and obtain a receipt confirmation with this program before notifying them.

Participant's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Do you want us to notify the recipient? Y / N , I will notify the recipient: Y / N  
OR

Do you want us to find a worthy recipient? Y / N

Thank you for becoming a Golden Patron.  
You will receive an Official Certificate honoring your patronage.

Love,  
Delilah and VDP Studio Staff

Sent Pledge Form to:



4128 FREMONT AVE N, SEATTLE WA 98103

[WWW.VISIONARYDANCE.COM](http://WWW.VISIONARYDANCE.COM)

Tel: (206) 632-2353