

PLEASE PRINT CLEARLY

# RCU Sponsorship Form

Thank You!

Please make checks payable to Rockford Choral Union & return with this form to:  
Rockford Choral Union, P.O. Box 8412, Rockford, Illinois 61126.

**I / We wish to make a one-time donation to support the performances of *Messiah*.**

\_\_\_\_\_ \$1000    \_\_\_\_\_ \$500    \_\_\_\_\_ \$250    \_\_\_\_\_ \$100    \_\_\_\_\_ Other

Name(s) to be listed in the program as follows:

Sponsor \_\_\_\_\_

Business \_\_\_\_\_

"In Honor of" \_\_\_\_\_

By \_\_\_\_\_

"In Memory of" \_\_\_\_\_

By \_\_\_\_\_

.....

**I / We wish to make a recurring monthly (or yearly) donation to support the performances of *Messiah*.**

\_\_\_\_\_ \$1000    \_\_\_\_\_ \$500    \_\_\_\_\_ \$250    \_\_\_\_\_ \$100    \_\_\_\_\_ Other

Name(s) to be listed in the program as follows:

Sponsor \_\_\_\_\_

Business \_\_\_\_\_

"In Honor of" \_\_\_\_\_

By \_\_\_\_\_

"In Memory of" \_\_\_\_\_

By \_\_\_\_\_

### Other Ways to Help

**Church-based Charitable Program:** Name of Church & Program: \_\_\_\_\_

**Employer Charitable or Matching Program:** Company & Contact: \_\_\_\_\_

**IRA-based Qualified Charitable Distribution** \_\_\_\_\_

**Thrivent Insurance Policy Holder**

**Thrivent Choice Dollar Program Participant**

Would you consider supporting RCU with your Thrivent Choice Dollars Donation?  Yes  No

Please contact me about: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_