

# Lakeshore Band Program

## Patron Form

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Email address to receive band newsletters \_\_\_\_\_

I will be a Lakeshore Band Patron at the following level: (check one)

\_\_\_\_\_ Up to \$50      Musician Level

\_\_\_\_\_ Up to \$100      Publisher Level

\_\_\_\_\_ Up to \$250      Arranger Level

\_\_\_\_\_ Up to \$500      Composer Level

\_\_\_\_\_ Up to \$1000      Conductor Level

\_\_\_\_\_ Over \$1000      Maestro Level

Check those that apply:

\_\_\_\_\_ Please do not print my name in the program  
*(If this line is not checked, your name will be printed)*

\_\_\_\_\_ I prefer this to be a business membership in the name of:

\_\_\_\_\_  
(Business or Company Name)

Return this form and your "Patron" tax deductible contribution to:

Allyson Rigler  
5541 Donald Street  
Stevensville, Michigan 49127

*Please make your check payable to: Lakeshore Band Parents*