

CONTRIBUTION FORM

I (We) wish to contribute \$ _____ to the Fremont Center for the Arts. I
(We) wish our contribution designated to:

Seasonal Operating Budget _____
Capital Improvement Fund _____
Permanent Collection Fund _____
Educational Fund _____
Endowment Fund _____

A check is enclosed: _____ Date: _____

Pledge enclosed: _____ (fill out below)

FUNDS PLEDGE

Name: _____

Sign: _____

Address: _____

Phone: _____

E-mail: _____



P.O. Box 1006, Cañon City, CO 81215

**Fremont Center for the Arts
is a 501(c)3 non-profit
organization.**

**A donation receipt for tax
purposes will be mailed to
you promptly.**

Many, many thanks!