

1. CHOOSE YOUR AREAS OF SUPPORT:	
☐ STAR Giving (\$50 - \$5,999) \$	
□ Supporter (\$50 - \$149) □ Associate (\$600 - \$1,249) □ Sponsor (\$150 - \$249) □ Regent (\$1,250 - \$1,999) □ Sustainer (\$250 - \$349) □ Ambassador (\$2,000 - \$2,999)	□ Season Producer (\$30,000-\$99,999)* \$
☐ Advocate (\$350 - \$599) ☐ Benefactor (\$3,000 - \$5,999)	☐ Apprentice/Studio Artist Sponsorship
 Youth Opera & Education Fund (\$50+) \$ Supporter (\$50 - \$149) ☐ Associate (\$600 - \$1,249) 	(\$3,000) \$
☐ Sponsor (\$150 - \$249) ☐ Regent (\$1,250 - \$1,999) ☐ Sustainer (\$250 - \$349) ☐ Advocate (\$350 - \$599) ☐ Benefactor (\$3,000 - \$5,999)	☐ Production Sponsor (\$100,000+) \$
☐ Leader (\$6,000 - \$11,999) ☐ Champion (\$12,000+)	2. ADD UP YOUR TOTAL GIFT:
☐ Artistic Achievement Fund (\$5,000+) \$	GRAND TOTAL (Sum of gifts in #1): \$
☐ Co-Producer (\$6,000-\$29,999)* \$ Select your level:	Total gifts less than \$6,000 receive Patron Tier benefits. Total gifts greater than \$6,000 receive Leadership Tier benefits and recognition.
☐ Single (\$6,000-\$11,999) ☐ Triple (\$18,000-\$23,999) ☐ Double (\$12,000-\$17,999) ☐ Quadruple (\$24,000-\$29,999)	I am interested in or have made estate plans leaving a bequest, beneficiary designation, or legacy gift to Sarasota Opera.
Select your opera(s): ☐ Cavalleria rusticana/Pagliacci ☐ The Marriage of Figaro	*As of September 1, 2024 the base rate for Co-Producer will rise to \$7,500.
☐ The Barber of Seville ☐ Stiffelio Sponsorship Add-On:	The Sarasota Opera Association, Inc., a not-for-profit, tax-exempt corporation, acknowledges all contributions as tax-deductible less the value of any goods or services received. A copy of the official registration and financial information may
Apprentice/Studio Artist Sponsorship (\$3,000) \$	be obtained from the division of consumer services by calling toll-free 1-800-435-7352 within the state. Registration does not imply endorsement, approval, or recommendation by the state. Registration number CH429. EIN: 23-7089047
3. ENTER YOUR RECOGNITION NAME & CONTACT	Please fill in this section so we can be sure your
	information is up to date in our system.
CONTACT INFORMATION Print your name(s) as you wish it to appear in all recognition of	
Print your name(s) as you wish it to appear in all recognition of	r on mailings. I wish to remain anonymous.
Print your name(s) as you wish it to appear in all recognition of Street Address or P.O. Box	r on mailings.
Print your name(s) as you wish it to appear in all recognition of Street Address or P.O. Box City State Zip	r on mailings.
Print your name(s) as you wish it to appear in all recognition of Street Address or P.O. Box City State Zip 4. ENTER HOW YOU PLAN TO FULFILL YOUR GIFT CHECK to Sarasota Opera Association, Inc. is enclosed for \$	r on mailings.
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