

**SCHOOL OF THE ARTS / DEVELOPMENT
NAME A SEAT IN THE KASSER THEATRE**

Instructions: Please print, complete and return this form with your check or credit card authorization to: Montclair State University Foundation, 1 Normal Avenue, Montclair, NJ 07043 (Call Chuck Gerdon at 973.655.7298 with questions)

A gift of \$1,000 will put your name, or another of your choice, on an orchestra seat in the new Alexander Kasser Theater. A gift of \$500 will name a seat in the balcony. Engraved plates will be prominently affixed to a seat in the section of your choice to show the world you are a supporter of the arts!

Name _____
Phone (_____) _____ Email _____
Address _____
City _____ State _____ Zip _____

I am requesting name plates for:

___ Orchestra seat(s) x \$1,000 Total _____

___ Balcony seat(s) x \$500 Total _____

Payment Method:

My check to the MSU Foundation for \$ _____ is enclosed.

Please charge my: MasterCard Visa Card

Number _____ Expiration Date _____

Cardholder Signature _____

Name _____ Phone (_____) _____

Address _____

City _____ State _____ Zip _____

Below are the name(s) I want on the seat(s), exactly as I wish it (them) to appear:

Seat 1 _____

Seat 2 _____

Seat 3 _____

Seat 4 _____