



ROCKFORD SYMPHONY ORCHESTRA

EFT DONATION FORM

DONOR INFORMATION

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

How would you like your name(s) to appear in the donor section of our program book?

I would prefer my donations to remain anonymous.

DONOR INFORMATION

Donor Levels

- Prelude: \$7 - \$16 per month
- Concerto: \$42 - \$83 per month
- Founders Club: \$146 - \$416 per month
- Overture: \$17 - \$41 per month
- Symphony: \$84 - \$145 per month
- Larsen Circle: \$417 per month and above

What amount would you like to donate to the Rockford Symphony Orchestra per month? _____

Unless requested otherwise, monthly donations are processed on the 1st or 15th of every month or the Friday prior when the 1st or 15th falls on a weekend.

- Process my donations on the 1st each month.
- Process my donations on the 15th each month.

ACCOUNT INFORMATION

Name on account (if different from donor name): _____

Bank Routing Number: _____ Account Number: _____

Type of Account:

- Checking
- Savings

SIGNATURE _____ DATE _____