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Yes!

Count me in for a pledge of:

\$

Giving levels:

- Quality of Life \$1,500 +
- Protector \$750 to \$1,499
- Benefactor \$550 to \$749
- Advocate \$250 to \$549
- Patron \$100 to \$249
- Friend \$99 and under

Name _____

Business _____

Address _____

City, State, Zip _____

Phone _____

Email _____

- A pledge to be paid later, please invoice me.
- Check enclosed payable to Allied Arts Fund
- Please bill my credit card

Card Type: Visa Master Card

Account # _____

Expiration Date _____

Signature _____

Bravo Listing _____

I wish to remain anonymous. Don't list me in Bravo