



PRINT & SEND DONATION FORM

Please mail your tax-deductible donation with this form to:

Atlanta Baroque Orchestra
PO Box 76864
Atlanta, Georgia 30358

DONOR INFORMATION

Title:_____ First Name:_____ Last Name:_____

ADDRESS INFORMATION

Address:_____

City:_____ State:_____ Zip Code:_____

Phone:_____ Email:_____

GIFT AMOUNT (Please check one.)

☐ \$500 ☐ \$200 ☐ \$100 ☐ \$50 ☐ Other_____

PAYMENT OPTIONS

- ☐ I have enclosed a check payable to Atlanta Baroque Orchestra
- ☐ I would like to use a credit card for my contribution.

Card Type:_____ Card Number:_____

Card Exp:_____ CVV:_____ Signature: _____

ADDRESS INFORMATION *If different from address above.*

Address:_____

City:_____ State:_____ Zip Code: _____

HONOR & MEMORIAL GIFTS

Honor your loved ones by making a contribution in their name! Please include the honoree's name in the space below. If you would like ABO to mail them an acknowledgement, include their address. Gift acknowledgments are sent to both the donor and to the person or family specified, although the donation amount is not revealed.

HONOREE INFORMATION

Title:_____ First Name:_____ Last Name:_____

HONOREE ADDRESS INFORMATION

Address:_____

City:_____ State:_____ Zipcode:_____

Message to Honoree:

Thank you for your generosity! Please let us know if you request an acknowledgment for tax purposes prior to the automated receipt you will receive in January of next year.