

Barbara Gaines
Artistic Director
Carl and Marilyn Thoma
Endowed Chair

Criss Henderson
Executive Director

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November 17, 2018

Dear Greeting:

Thank you! We are so grateful for your pledged support of \$100, which will help to fuel Chicago Shakespeare Theater's artistic, educational, and civic engagement programming. Your donation makes you a valued partner in all our accomplishments, and we are truly grateful for your interest in our work.

Our 2018-2019 Season is a special one, as we celebrate our 20th anniversary at our home on Navy Pier. When we moved to our permanent home in 1999, we were producing three plays each season for 7,000 subscribers. Since then, thanks to the support of donors like you, we have grown into a Tony Award-winning theater that annually welcomes 225,000 audience members to as many as 20 productions!

As a nonprofit theater company, everything we do is made possible by donor support—from the ambitious artistry you see on stage, to our nationally recognized education and community initiatives. In the upcoming season alone, your gift will allow us to partner with 2,500 English teachers, 40,000 students, and 30,000 families throughout Chicago's schools, neighborhood parks—and beyond.

We ask that you please take a moment to complete the form below and return it with your tax-deductible gift in the enclosed envelope today. In recognition of your generosity, you'll receive exclusive benefits and experiences available only to Chicago Shakespeare's family of supporters. Thank you again!

Gratefully,

A handwritten signature in black ink, appearing to read "Brooke".

Brooke Flanagan
Managing Director for Advancement and External Affairs

SD&A Teleservices, Inc., a professional fundraiser, has conducted this solicitation on behalf of Chicago Shakespeare Theater.



Pledge Amount: \$100

PatronID SourceCode AgentID

PatronName
Address1
Address2
City, ST ZipCode

- Enclosed is my check in the amount of \$ _____ made payable to *Chicago Shakespeare Theater*.
- Please charge my gift of \$ _____ to my:
 - VISA MasterCard AMEX Discover

Card No. _____

Expiration Date _____ / _____ CVV# _____

Signature _____ Date _____

Email _____