



Name: _____

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(if you would like to receive special offers)

Yes, I wish to become:

- Angel\$1000 or more
- Benefactor\$500 to 999
- Patron\$250 to \$499
- Friend\$50 to \$249
- Member\$35

I wish to make a tax deductible donation: \$ _____

Name _____

(as you would like it to appear in the program)

Check: Visa: Mastercard:

Card No: _____

Exp.: _____

Signature: _____

Charitable donation registration no.: 11881 9804 RR 0001

Mail to: **Theatre Lac-Brome, 9 Mt.Echo, Knowlton, QC J0E 1V0**

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