



## YOPAC Donation Form

**Giving music, theatre, and dance back to our children.**

### Donor Information (please print or type)

Name	
Billing address	
City	
State	
ZIP Code	
Telephone (home)	
Telephone (business)	
Fax	
E-Mail	

### Donation Information

I (we) pledge \$\_\_\_\_\_ to be paid:  
on today's date \_\_\_\_\_ or on the following date \_\_\_\_\_

I (we) plan to make this contribution in the form of:  
\_\_\_ cash \_\_\_ check \_\_\_ credit card \_\_\_ other



Credit card type	
Credit card number	
Expiration date	
Authorized signature	

Gift will be matched by \_\_\_\_\_ (company/family/foundation).  
\_\_\_ form enclosed \_\_\_ form will be forwarded

### Acknowledgement Information

Please use the following name(s) in all acknowledgements:

Signature(s)
Date

Please make checks, corporate matches, or other gifts payable to:

Cal Poly Corporation  
YOPAC/ Performing Arts Center  
1 Grand Ave.  
San Luis Obispo, CA 93407-0441  
For more information contact Melody Klemin. 805-756-7223  
Non- Profit Organization Federal Tax ID# 77-0408837