Shanklin Theatre Seat Donation Form

Official Use only		
Seat Number	**Plaque Processed**	**Certificate Issued**

Name:-- _____

Address:-- _____

_____

_____

Post Code:-- _____

Telephone No.:-- _____ **Mobile:--** _____

Email Address:-- _____

Fost Member:-- **YES / NO**

Method of payment:-- **£50.00** **Cash / Cheque / Debit Card / Credit Card**

Cheques made payable to Friends of Shanklin Theatre

Balcony Seat:-- **YES** **Auditorium Seat** **YES**
(Static Seat) **(Non-Static Seat)**

Your plaque will look similar to this example

Please choose one of the following Designs and enter the Name & Date(s) required on your plaque

Supported by John Smith November 2011

Donation in Memory of

Suppported by

Please Note: Seat Sponsorship lasts for a period of 10 years

Please check that all details are correct as the plaque cannot be altered after your order has been processed

Print Name:-- _____

Signature:-- _____

Date:-- _____