

Annual Membership

The work of the Bologna Performing Arts Center as a cultural resource for the Delta is ongoing, and your continued participation is an important part of our ability to meet the increasing demands placed on the center. We invite you to renew your commitment or become a donor for the first time. Your valued support makes us one of the finest performing arts centers in Mississippi. To show our appreciation for your membership support, we offer you these outstanding benefits and privileges to enhance your enjoyment of all the arts and entertainment at the Bologna Performing Arts Center.

For more information please contact the Bologna Performing Arts Center at **662.846.4625**.

MEMBERSHIP BENEFITS	Cameo \$149 or less	Supporting Role \$150-\$299	Headliner \$300-\$499	Director \$500-\$999	Producer \$1000-\$2500	VIP \$2500-\$5000	Exec. Producer \$5000+
Subscription to the season brochure	●	●	●	●	●	●	●
Benefit performance seating priority	●	●	●	●	●	●	●
Two tickets to Annual Members Reception		●	●	●	●	●	●
Listing in playbills		●	●	●	●	●	●
Advance purchase privileges			●	●	●	●	●
Same seating for season subscription <i>(based on availability)</i>				●	●	●	●
One member parking pass				●	●	●	●
Two season ticket packages						●	●
Sponsor a child for the Janice Wyatt MS Summer Arts Institute						●	●
Two invitations to the President's Award Dinner						●	●
Two additional season packages							●
Sponsor main stage performance							●
Backstage "Meet and Greet" with selected artists							●

BPAC 2010-2011 Annual Membership Form

Select Your Membership Category

- Cameo (\$149 or less) Producer (\$1000-\$2499)
 Supporting Role (\$150-\$299) VIP (\$2500-\$4999)
 Headliner (\$300-\$499) Executive Producer (\$5000+)
 Director (\$500-\$999)

Please complete information below:

Are you an: Individual Company

Name(s) _____

Company (if applicable) _____

Name(s) as you wish them to appear in publications _____

Check here if you would prefer not to be listed.

Address _____

City _____ State _____ Zip _____

Home Phone _____

Work Phone _____

Email _____

Method of Payment: (select one)

- Check: Made payable to Delta State University Foundation-Bologna Membership
 Bill Me Quarterly: Amount \$ _____
 Date to begin payment: ____/____/____
 Payroll Deduction: Amount \$ _____
 Date to begin payment: ____/____/____
 Credit Card: ___ MasterCard ___ VISA

Name on Card _____

Card Number _____

Expiration Date _____

Donation Amount _____

Signature _____

My company will match this gift with a contribution:

Company Name _____

Donation Amount _____

Return form to: Bologna Performing Arts Center, 1003 W. Sunflower Rd., DSU, Box 3213, Cleveland, MS 38733
 Please enclose the appropriate forms. Your personal gift and matching contribution determine your membership level. **Note:** Portions of your membership contribution are tax deductible.
 Please call the Bologna Performing Arts Center Box Office at **662-846-4626** for more information.