



(Audience Development Committee, Inc.)

BASIC/CONTRIBUTOR \$50.00
One-year subscription to *Intermission*, AUDELCO's newsletter.

DONOR \$100.00
Contributor Benefits & First choice of tickets to AUDELCO Night Out.

SPONSOR \$250.00
One (1) ticket to the **Annual Vivian Robinson AUDELCO Recognition Awards "The VIV"**.

PATRON \$500.00
Two (2) tickets to the **Annual Vivian Robinson Recognition Awards, "THE VIV"**

ORGANIZATION/GROUPS \$350.00
One 1 and 1/2 tickets to the **Annual Vivian Robinson AUDELCO/Awards "The VIV"**.

TORCH BEARER \$1,500.00
2 tickets to the **Annual Vivian Robinson AUDELCO Recognition Awards**, 1/2 page Journal ad in the annual publication the **OVERTURE**.

BENEFACTOR \$2,500.00
(3) tickets to the **Annual Vivian Robinson AUDELCO Recognition Awards**, full page ad in the annual publication the **OVERTURE**.

VISIONARY \$5,000.00 & UP
All **BENEFACTOR** benefits plus additional tickets (4), Your Logo will appear on **AUDELCO's** major printed materials, and a Full page Journal ad in the annual publication the **OVERTURE**.

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FRIENDS OF AUDELCO APPLICATION 2019

- New Contributor
- Renewal
- Please enroll me at the level checked below for 2019 as a Friend of AUDELCO**
- () \$50 Basic/Contributor () \$250 Sponsor () \$350 Organization () \$2,500 Benefactor
- () \$100 Donor () \$500 Patron () \$1,500 Torchbearer () \$5,000 & Up Visionary

Date: _____

Name: _____
 (Please Print)
 Mailing Address: _____
 (Please include Apt. #)
 City: _____ State/Zip: _____ NY _____
 Home Tel: _____ Bus. Tel: _____
 Fax #: _____ EMail: _____

Please make check or money order payable to AUDELCO

Payment Record (cash) (check) (M.O.)
 (for office Use only)
 Date Received _____ / _____ / _____
 AMC

Mail this application to:
Friend of AUDELCO
P.O. Box 30, Manhattanville Station
New York, NY 10027

Check website re: Pay Pal <http://www.audelco.net>