

Contribution Form!

Yes, I wish to contribute in the amount of \$_____! I want my tax deductible donation to go towards the:

- General Workshop Fund**, supporting the Piven training center for children and adults.
- Byrne Piven Memorial Fund**, supporting upcoming productions at the Piven Theatre.
 - Dick Cusack Memorial Fund**, supporting the Performance Lab of Piven.
 - Millennium Campaign**, supporting Piven Theatre's scholarship and outreach efforts.
- Scholarship / Outreach Fund** in honor of: Lynn Hirsch David Friedler Ron Saiset Other_____

Double or Triple the Value of Your Gift to Piven through your Employer's Matching Gift Program!

Just ask your company's matching gift officer for a matching gift form, send it to us with this form, and we'll do the rest!

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Enclosed is my check made payable to Piven Theatre Workshop Please charge my ___ Visa ___ Mastercard ___ Discover

Card #: _____ Expiration Date: _____

Name on Card: _____ Signature: _____

Please mail to: Piven Theatre Workshop, 927 Noyes St. #110, Evanston IL 60201