



Donation Form

Please accept my donation in the amount of \$ _____

In Honor of: In Memory of: _____

Send Notification Card To: _____
Print name as you would like it to appear on the notification card

Address _____

City _____ State _____ Zip _____

Please apply my donation to the following:

- Where the need is greatest
- General Fund
- Stars Under The Stars
- Private Concert Series
- Established Endowment _____

If you are interested in creating an endowment, please download the Endowment Information Packet at www.foundationformusiceducation.org or call (806) 687-0861 for more information.

Benefactor Information

Benefactor Name (as it should be listed) _____

Address 1 _____

Address 2 _____

City _____ State _____ Zip _____

Contact First Name _____ MI _____ Last _____

Phone _____ Fax _____

E-mail _____

Signature _____ Date _____

Please mail this form, along with payment to:
The Foundation for Music Education
Attention: Jana DeGreek, Director of Finance
10701 Upland Avenue
Lubbock, Texas 79424

To pay by credit card, complete and return the enclosed Credit Card Authorization Form.

Credit Card Authorization Form



I, _____, hereby authorize The Foundation For Music Education,
to charge my credit card account for the amount of*: \$ _____

Credit Card Information

Credit Card Type Visa Mastercard American Express Discover

Credit Card Number _____

Expiration Date _____

Cardholder Name (as it appears on card) _____

Credit Card Billing Address

Address 1 _____

Address 2 _____

City _____ State _____ Zip _____

Your completion of this authorization form helps to protect you from credit card fraud. All information will be kept strictly confidential.

Cardholder Signature _____

*All donations are subject to a 3% transaction processing fee.