



Donation Form

Providing world class chamber music performances year round to Central Oregon.

Donor Information (please print)

Name	
Company Name	
Address	
City	
State	
Zip	
Telephone (home)	
Telephone (business)	
E-Mail	

Donation Information

I (we) would like to donate a total of \$ _____ to be paid in the form of:

_____ check _____ paypal.    

PayPal address	highdesertchambermusic@gmail.com
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Gift will be matched by _____ (company/family/foundation).
_____ form enclosed _____ form will be forwarded

Acknowledgement Information

Please use the following name(s) in all acknowledgements:

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_____ I (we) wish to have our gift remain anonymous.

Signature(s)
Date

Please make checks, corporate matches, or other gifts payable to:

High Desert Chamber Music
P.O. Box 1272
Bend, OR 97709