



ADOPT-A-MUSICIAN

Date _____

Be part of the RWS Team! Your generous donation will fund the membership and uniform costs for the member(s) of your choice for the season.

Your Name(s): _____ Phone: _____
(as you want it printed) First Last

Billing Address: _____
Street City State Zip

Check here to omit recognition in the program

Member 1: _____ \$100

Member 2 (opt.): _____ \$100

Additional General Donation (opt.): \$ _____

GRAND TOTAL: \$ _____

Please hand this completed form to one of our conductors today or mail to:

Reno Wind Symphony
Scott Thunder
1325 Airmotive Way, Suite 125
Reno, NV 89502

Payment Information:

Cash Check # _____

*Make checks payable to
Reno Wind Symphony*

Credit Card

*A representative will call to take your
credit card over the phone.*