



**STADIUM THEATRE PERFORMING ARTS CENTRE**

28 Monument Square \* Woonsocket, RI 02895

401-762-4545

**Seat Campaign Order Form**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Number of Seats, \$250.00 each: \_\_\_\_\_ Total Paid: \$ \_\_\_\_\_

\*I would like to donate an additional gift of \$ \_\_\_\_\_

- The full amount of your payment is tax-deductible

EXACT NAME to appear on the seat nameplate  
(30 character maximum)

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_ In Memoriam      \_\_\_\_ Gift      \_\_\_\_ Anonymous

We gladly accept Visa, Mastercard, and American Express:

Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Please make *checks* payable and mail to:

Stadium Theatre Foundation  
28 Monument Square  
Woonsocket, RI 02895

*Thank You for your Support!*