



# LETTER OF INTENT

## PLEDGE:

To support the renovation and restoration of the NorShor Theatre, I / we pledge and agree to pay the sum of \$\_\_\_\_\_.

- I / we will pay the amount in full.
- I / we will pay this pledge in \_\_\_\_\_ installments over \_\_\_\_\_ years.

### Your Contact Information:

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Recognition: (please check one)

- Your name, as it is to appear on donor rosters: \_\_\_\_\_
- This is an anonymous gift. Please do not publish my name/our names on any donor roster.
- I / we wish to make this gift a memorial or living tribute in the name of: \_\_\_\_\_

Please send acknowledgement of memorial / living tribute to: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Payment: (please check one)

*Please make checks payable to: Duluth Playhouse*

Cash  Check  Visa  MC  AmEx  Discover

I would like to make my gift through stock, security, real estate, or other vehicle. Please contact me.

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

CCV #: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Cardholder Name: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

### Please mail this form to:

NorShor Theatre | Attn: Kendra Carlson | c/o Duluth Playhouse  
506 W. Michigan St. | Duluth, MN 55802

Questions? Contact Christine Gradl Seitz at (218) 733-7551  
or [seitz@duluthplayhouse.org](mailto:seitz@duluthplayhouse.org).

Your Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Note: This is a declaration of intent and may, in the event of financial change, be increased, decreased, or cancelled at the option of the donor(s).