



NATIONAL LEADERSHIP COUNCIL FOR DANCE

PLEDGE FORM

I pledge to support Dance/USA's work to strengthen and advance the field of professional dance in the United States as a member of the National Leadership Council for Dance (NLCD) by making a minimum annual contribution of \$2,500 to Dance/USA.

Please indicate the number of years you are pledging to make an annual contribution by checking the appropriate line below:

\_\_\_\_\_ one (2016) or \_\_\_\_\_ two years (2016 & 2017)

Please indicate the amount of your contribution per year: \$\_\_\_\_\_

\_\_\_\_\_ I wish to decline the benefits and deduct the entire amount of my contribution. (Non-deductible portion of contribution is \$750 per year.)

\_\_\_\_\_  
Donor Signature Date

\_\_\_\_\_  
Donor's name as you wish it to appear in donor listings.

For questions or to return Pledge and Payment forms, please contact:

April Gruber  
Director of Development  
Dance/USA  
1029 Vermont Avenue, NW | Suite 400  
Washington, DC 20005  
agruber@danceusa.org | Phone: 202-833-1717 | Fax: 202.833.2686



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FOR DANCE

**1. CHOOSE PAYMENT METHOD**

\_\_\_ A **check** for my contribution of \$ \_\_\_\_\_ is enclosed.  
(Please make check payable to Dance/USA)

\_\_\_ I wish to pay my contribution of \$ \_\_\_\_\_ by **credit card**.

**2. CREDIT CARD PAYMENT OPTIONS**

**OPTION 1**

\_\_\_ Charge my credit card for the full amount of my contribution.

**OPTION 2**

\_\_\_ Charge my card \$ \_\_\_\_\_ per month beginning \_\_\_\_\_.

**3. CREDIT CARD INFORMATION**

Type of card: \_\_\_ MasterCard \_\_\_ VISA \_\_\_ American Express

Card # \_\_\_\_\_

Expiration date: \_\_\_\_\_ CVV2: \_\_\_\_\_

Name as it appears on card \_\_\_\_\_

Signature \_\_\_\_\_

Billing address of card holder:

Street address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: (day) \_\_\_\_\_ (cell) \_\_\_\_\_

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***Thank you for your support!***