

THE BEST SEAT IN TOWN CAMPAIGN: DONATION ORDER FORM



WAIVED seat selection upgrade if returned by August 12.

| Donor Information | | | |
|---|---|--------------------------|---------------|
| Name: | | | |
| Address: | City: | State: | Zip: |
| Phone: | Email: | | |
| Seat Selection | | | |
| Number of seat pairs: | (\$5,000 per pair) | | |
| $\hfill\square$ I would like to choose my seat locat | ion (\$ 1,000 opgrade per pai r) WAIVED |) when you respond befor | re August 12! |
| Preferred seat location(s):(Please refer to updated seat map on inser | t. You may be called to finalize available se | eating options.) | |
| Payment Information | | | |
| □ I am paying in full today. | | | |
| I would like to receive statements □ | in equal amounts over the next Quarterly | ually | |
| | ou authorize monthly withdrawals from y se on the 5th of each month or the first b | | |
| Name on account: | Signature: | | |
| Routing Number: | Account Nu | mber: | |

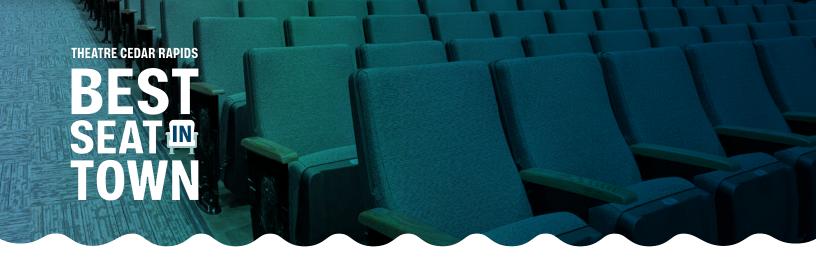
COMPLETE PLAQUE INSCRIPTION INFORMATION ON BACK.



Sponsorship does not reserve or guarantee show tickets in selected seats.

Campaign gifts are tax-deductible to the extent allowed by the law. Please check with your attorney or tax-advisor to determine the deductibility of any charitable gift. Receipts of gifts will be sent annually in the month of January for the previous year. If you have questions about your gift, please contact Hannah Brewer at 319-366-8592 ext. 207





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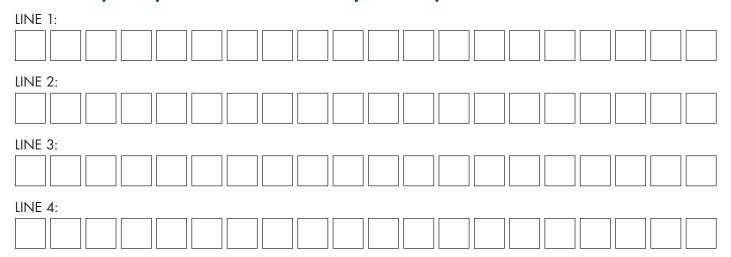
Plaque Inscription

Each plaque includes space for up to four lines of text, 20 characters per line (including spaces).

EXAMPLE:

CALVIN BARD
BUILDER OF DREAMS
BEST SEAT IN TOWN
100 YEARS STRONG

Please complete up to four lines of text for your inscription:





INTRODUCING...THE NEW AND IMPROVED TCR AUDITORIUM SEAT

Please use this key to choose your row and seat numbers, and enter them in the seat selection portion of the order form.

