

Key Players Music Mentoring Program Sponsor Form

Thank you for your interest in and donation to the Dana V. Music Key Players Music Mentoring Program! We are excited to bring music to children who are studying an instrument for the first time in their lives and look forward to fostering a life-long love of music.

As a donor, you have the opportunity to be a sponsor of a child here in Boulder County. We invite your participation in getting to know this child and his/her musical development. So that we may better facilitate this relationship, we request that you take a moment to look over the options below before we proceed with the student selection and sponsorship.

Key Players Music Mentoring Sponsorship Options

1. Do you prefer to have your donation go towards sponsorship of a student or the general fund (funds to be applied where most needed in Key Players program, i.e., instruction, sheet music, instruments)?

Sponsorship of Student Key Players General Fund

2. Would you like your sponsorship to be distributed to a specific program? If so, check all that apply.

Piano Voice/Choir Violin Viola Cello Guitar Flute
 Clarinet Eurhythmics Music Theory Preschool Musical No preference

3. Would you like to know the name and age of the sponsored child? Yes No
(For security reasons we will not include home addresses or school).

4. Would you like to receive progress reports about the student? Yes No

If so, how often? Monthly End of semester

5. All of our students are encouraged to perform in recitals. Are you interested in being invited to performances of your sponsored student?

Yes No

6. We have opportunities to advertise this program through our website, Facebook, Twitter, and local newspapers. May we use your name and/or business name in these advertisements?

Yes No

(If Yes, you will be contacted by Dana V. Music for logo and business/personal/organization description)

7. The purpose of the Key Players Music Mentoring Program is to provide long-term music instruction and continuity for every student. Would you like to make this an annual donation to the sponsored student or general fund? (maximum length of program is 7 years)

Yes No Please contact me at the end of each year.

Please specify the tax-deductible amount you wish to contribute:

One-time donation: _____
amt

Recurring donation: _____ Annually Semi-annually Duration: _____ years
amt

Check (Please make check payable to *Impact on Education* and note "DVM Key Players" on the memo line)

Credit Card (authorization form attached)

Name: _____ Date: ____/____/____
First Last MM DD YY

Business Name: _____ Home Phone: _____
(If applicable)

Address: _____ Apt./Ste. # _____
Street
_____ City _____ State _____ Zip Code

Cell Phone: _____ Work Phone: _____

Email Address: _____

Preferred method of contact: Phone Email Mail

Thank you for participating in this educational program and being a pioneer in furthering musical development for all children. We are looking forward to keeping you updated as this program continues to grow and change the lives of many students!

Sincerely,

Dana Vachharajani, Co-Director

Katie McClave, Co-Director

Nancy Fitzgerald, Marketing Director and Coordinator