



# Concerts at the Cathedral Basilica

Concerts at the Cathedral Basilica  
1723 Race Street  
Philadelphia, PA 19103  
concertsatthecathedral@gmail.com  
www.CathedralPhilaConcerts.org

## Donation Pledge Form

Last Name (print): \_\_\_\_\_ First Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Telephone Numbers: (Home) \_\_\_\_\_ (Work/Cell): \_\_\_\_\_

Email: \_\_\_\_\_

Name as you wish it to appear in our season programs\*: \_\_\_\_\_

I want my gift to be anonymous

## Donation/Pledge Amount and Type

One-Time Cash Donation: \$ \_\_\_\_\_ to be paid on \_\_\_\_\_ -or-

**Monthly / Quarterly / Yearly Gift** (please fill out only one choice below. Your signature below is required for your pledge.)

1. I wish to contribute \$ \_\_\_\_\_ per Month / Quarter / Year beginning on \_\_\_\_\_ through \_\_\_\_\_  
(circle one above) (date) (date)

for a total gift of \$ \_\_\_\_\_.

2. I wish to contribute \$ \_\_\_\_\_ per Month / Quarter / Year (circle one), until revoked in writing.

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

## Payment

*Concerts at the Cathedral Basilica will invoice you your pledge as per your terms above or you may donate now by filling out the information below.*

Enclosed is my check payable to "Concerts at the Cathedral Basilica" for \$ \_\_\_\_\_ -or-

Charge my Credit Card in the amount of: \$ \_\_\_\_\_

Card No. \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature \_\_\_\_\_

Please send this complete form to:  
Concerts at the Cathedral Basilica, 1723 Race Street, Philadelphia, PA 19103

Email: [concertsatthecathedral@gmail.com](mailto:concertsatthecathedral@gmail.com)

We hope you will consider making your TAX DEDUCTABLE DONATION today and join our family of donors.  
**All donations are used exclusively to bring World Renowned Artists to our Historic Cathedral Basilica.**