



# Footloose

## Ads and Donations and T-shirts, oh my!

**Make-Up** - We are requesting that the cast provide their own eyeliner and mascara (black). We will be buying some in bulk. Please indicate if you would like us to purchase it for you.

- No thank you, we will buy our own
- Yes, please order me eyeliner and mascara \$8 = \$ \_\_\_\_\_

**T-Shirts** - We offer a cast designed show T-shirt for \$10 (must order by 2/8)

- No thank you
- Yes, please order me \_\_\_\_\_ (#) shirts Size(s):  S  M  L  XL \_\_\_\_\_ x \$10 = \$ \_\_\_\_\_  
# of shirts

**Teen Angel Donation** (*Teen Angel contributions are tax-deductible as permitted by law.*)

The success of this show depends in part on the financial support of our families and friends. Thank you for whatever level of support you feel comfortable providing.

- No thank you - I will support the show in other ways
- Yes, I would like to give!** **My Donation Amount \$ \_\_\_\_\_**

Levels: Cherub (\$20 - 34), Angel (\$35 - 49), Guardian Angel (\$50 - 99), Archangel (\$100 & up)

*Please let us know how you would like to be recognized:*

- I would like to be Anonymous.
- I would like to be recognized in the program as:

\_\_\_\_\_  
(Examples: John Smith/The Smith Family/John Smith and Jane Doe)

### Ad Sales

Advertise your business or honor your child! Use your own ad or we can create one for you.

___ Inside Cover (front/back)	4.5" w x 7.5" h	\$200
___ Full Page:	4.5" w x 7.5" h	\$175
___ 1/2 Page:	4.5" w x 3.75" h	\$90
___ 1/4 page Horizontal:	4.5" w x 1.85" h	\$60
___ 1/4 page Vertical:	2.2" w x 3.75" h	\$60

Please submit a high resolution JPG (preferred) or PDF of your ad copy by February 10th to Amy Fortier at [amyfortier@surfon.com](mailto:amyfortier@surfon.com)

**Make-up \$ \_\_\_\_\_ + T-Shirt(s) \$ \_\_\_\_\_ + Teen Angel \$ \_\_\_\_\_ + Program Ad \$ \_\_\_\_\_ = Total \$ \_\_\_\_\_**

Name \_\_\_\_\_  
 Street \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Email\* \_\_\_\_\_ Phone \_\_\_\_\_

*\*If you provide your email address you will automatically be added to the NCCT email list.*

Cash  Check # \_\_\_\_\_  Charge my Credit Card:  Visa  MC  Discover  
 Name \_\_\_\_\_ # \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVC # \_\_\_\_\_