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**YES – I would like to donate the value of my ticket to support Auckland Arts Festival….**

I bought tickets for (show name) ……………………………………………………………………………..…………………………

on (date) …………………………………………………..…………………………………..

Choose from an amount below, **OR** enter the amount you are happy to donate

[ ]  $25 [ ]  $50 [ ]  $100 [ ]  $250 [ ]  other amount $

**Your details:**

1. Title ………………. First Name …………………………………………………… Last Name …………………………………..………………………..

2. Title ………………. First Name …………………………………………………… Last Name ……………………………….…………….………………

PostalAddress ………………………………………………………………………………………………………………………..…………………….………..…..

………………………………………………………………………………………………………………………………………………..…………

Phone …………………………………………………………….………… Mobile ………………………………………………..…………………………..……..

Email 1 ………………………………………………………………......………. Email 2 ………………..…..………………………………………………………

**Payment Options:** [ ]  Direct Credit (please send me the details) [ ]  Mastercard [ ]  Visa

Name on card ……………………………………………………………………….… Signature …………………………………………………………………

Card # ………..…….…./……..……….…./…….……..……./………….………. Expiry Date ……………./…………….

**Please email your completed form to** patrons@aaf.co.nz

[ ]  Yes, please send me a tax receipt

**Please keep me updated with Festival news:** [ ] *YES* [ ] *NO Thank you for supporting Auckland Arts Festival!*