



Behre Piano Associates, Inc.
d/b/a Adamant Music School

Sustaining Membership Form

Thank you for choosing to become a sustaining member of the Adamant Music School.

Your contact information:

Name: _____

Address: _____

City/State/Zip/Country _____

Primary Phone: _____ E-mail: _____

Monthly pledge amount:

- \$100.00
- \$50.00
- \$25.00
- \$20.00
- \$15.00
- \$10.00
- \$5.00
- Other \$ _____

Your payment information:

BANK WITHDRAWAL

By selecting this box, I authorize Adamant Music School to deduct my pledge from my checking/savings account automatically on the first business day of each month.

Checking **Savings**

Bank: _____

Routing number: _____

Account number: _____

Account holder name: _____

CREDIT CARD

By selecting this box, I authorize Adamant Music School to charge my pledge to my credit card automatically on the first day of each month.

Visa ____ MasterCard ____ American Express ____ Discover ____

Name (as it appears on card) : _____

Credit Card Number: _____ - _____ - _____ - _____

Expiration Date (MM/YYYY): _____ - _____

Security code: _____ *(last 3 digits in the signature panel or 4 digits on the front for Amex)*

Note: Did you know that up to 4% of your donation goes to credit/debit card fees. Use Bank withdrawal and AMS will receive the full amount of your contribution.

Signature – **Required:** _____ Date: _____

One Time Gift - At this time I choose to make a one-time gift, enclosed is my check.

Please mail this form to: **Adamant Music School, PO Box 22 Adamant, VT 05640**
All contributions are tax-deductible. We will mail you an acknowledgment for your tax purposes.