



No ifs, Ands, or Buts...I want to help StarStruck purchase 75 seats for the Ohlone College Amphitheatre with my donation of:

___ \$25 ___ \$50 ___ \$100 ___ \$250 ___ Other \$ _____

* For donations of \$250 and more, StarStruck will contact you about the plaque inscription

Method of payment:

___ Enclosed (Please make check payable to StarStruck Theatre)

___ Charge my gift to:

Mastercard Visa

Card No: _____ Security code _____ Exp. Date _____

(3-digit code on back of MC, Visa)

My Company _____ will match my gift of \$ _____.

(Please fill out completely so that we may acknowledge your tax-deductible gift)

Name _____

Address _____ **City** _____ **Zip** _____

Phone _____ **Email address** _____

Mail form and donation to:
StarStruck Theatre
43575 Mission Blvd. #616
Fremont, CA 94539

Thank you for helping us reach our goal of \$18,750!