

DOES YOUR ORGANIZATION HAVE A MATCHING GIFT PROGRAM?

Yes No

If yes, please specify a contact person

Name: _____

Telephone: _____

E-mail _____

Youth America Grand Prix. I am enclosing a contribution of \$ _____



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support@yagp.org

*Youth America Grand Prix is a 501(c)(3) non-profit organization.
All contributions are tax-deductible to the full extent applicable by law.*

Yes, I would like to support YAGP in its mission to provide unprecedented educational and professional opportunities to talented young dancers worldwide.

I would like to contribute at the following level:

\$500 \$1,000 \$2,500 \$5,000 \$10,000+

**I will not be able to attend,
but would like to support YAGP in the amount of:** _____

Name(s) as you would like it to appear in all YAGP acknowledgements:

Enclosed is my contribution of \$ _____

Please charge my credit card for the amount of \$ _____

Credit card # _____

Visa MasterCard American Express

Expiration date: _____

Name as it appears on the credit card:

Telephone: _____

E-mail: _____

Billing address: _____

City: _____

State: _____

Zip: _____