



Please send this form and your payment to:
KEYS PO Box 532, New Canaan, CT 06840.

For assistance, please contact us at 203 350-0255
or email us at admin@keysmusic.org.

YES! I want to make a child's day by giving them access to a music education!

Please print this form with your contribution today. Your contribution is tax deductible by law.

- Select Gift:**
- \$5,000 provides summer camp for 5 students
 - \$1,000 provides summer camp for 1 student
 - \$600 provides music lessons for a year for 1 student
 - \$240 provides a month of music lessons for 4 students
 - \$120 provides a month of music lessons for 2 students
 - \$60 provides a month of music lessons for 1 student
 - \$ Other

I have enclosed a check payable to "KEYS"

I wish to give by credit card

Visa, Master Card, Discover, or American Express:

Card #: _____

Exp Date: _____ Security Code: _____

Signature: _____

Yes! I will cover processing fees (3.5%) so that KEYS receives the full donation

OR I wish to give MONTHLY

Yes! Please bill my credit card in the amount of \$_____ per month

Yes! I would like to make a monthly gift in the amount of \$_____ using my checking account. I have attached a voided check from the account I would like to use.

Billing & Address Information:

Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Email Address: _____

Kids Empowered by Your Support

keysmusic.org