

**Donor Information**

Name \_\_\_\_\_ Organization (if applicable) \_\_\_\_\_

Write your name(s)/company/organization as you would like to be listed in formal recognitions.

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Support La Crosse Symphony Orchestra**

I (we) pledge a total of: \$ \_\_\_\_\_ in support of La Crosse Symphony Orchestra. I wish to start my contribution:

Year	2026	2027	2028	2029	2030	Total
Contribution	\$	\$	\$	\$	\$	\$

Signature \_\_\_\_\_ Date \_\_\_\_\_

*This pledge is a commitment to give the amount specified.*

**Contribution Information**

I would like my gift to be  In Honor of  In Memory of Name: \_\_\_\_\_

Please indicate your naming rights preference: \_\_\_\_\_

I would like my gift to be anonymous.

**Contribution Method**

Check: Make checks payable to **La Crosse Symphony Orchestra - 201 Main Street Ste 230 | La Crosse, WI 54601**

Credit Card: Accepted online at [www.lacrossesympphony.org/contribute/](http://www.lacrossesympphony.org/contribute/) (Donations may be a one-time gift or bi-annual.)

If you are interested in giving by the following methods, please contact Eva Marie Restel with questions.

Required Mandatory Distribution (RMD)/Qualified Charitable Distribution (QCD)  Donor Advised Fund

Charitable Trust  Stock Transfer  Employer Matched Gift: Company Name \_\_\_\_\_

Other (describe) \_\_\_\_\_

**Eva Marie Restel, LSO Executive Director**  
[exec@lacrossesympphony.org](mailto:exec@lacrossesympphony.org) | Phone: 608-783-2121

**Co-Chair Name, Co-Chair**  
 add email address | Phone: 000-000-0000

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 add email address | Phone: 000-000-0000

**La Crosse Orchestra Symphony**  
 201 Main Street Suite 230  
 La Crosse, WI 54601  
[www.lacrossesympphony.org](http://www.lacrossesympphony.org)