

KANSAS CITY SYMPHONY BUSINESS ALLIANCE MEMBERSHIP and CONCERT SPONSORSHIP PLEDGE FORM 2025-2026 KANSAS CITY SYMPHONY SEASON (September-June)

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Please complete the form below and return it via email to: Mark Laverentz, Manager of Corporate Partnerships, at mlaverentz@kcsymphony.org Company Name below (as you wish it to appear in Symphony program books): Social Media Handles: Contact Name: _____ Title: _____ Phone: E-mail Address: Street Address: City/State/Zip: Pledge and contribution amount \$ For: _____ Invoice request date $___$ or Check enclosed \Box or Check to be mailed \Box Credit Card Information Name on Card Type of Card Card Number Exp. Date Security Code Signature for Corporation/Date Signature for the Kansas City Symphony/Date

*If you do not request a date for an invoice, one will be sent to you within 30 days of the Symphony's receipt of this pledge form. We request full payment no later than 30 days after the last sponsored performance.