



# Donation Form

Name: \_\_\_\_\_

Please keep my donation anonymous

Street: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

Donation Amount: \$ \_\_\_\_\_

CC #: \_\_\_\_\_ Exp. Date: \_\_\_\_ / \_\_\_\_

OR

Make checks payable to: The Brass Tacks Ensemble

Return this form with payment to:

The Brass Tacks Ensemble  
c/o Isaac Ellis  
3118 Williamsburg Rd.  
Ann Arbor, MI 48108

**Thank you for supporting The Brass Tacks Ensemble.**

To learn more, please visit [www.btensemble.org](http://www.btensemble.org)