

LCHS Choral Parents Association Membership 2016-2017

The LCHS Choral Parents Association invites you to become a CPA Member and active supporter of the LCHS choral music program by donating to CPA. Your donation will support our outstanding program, which is led by **Dr. Jeff Brookey**.

CPA's membership donations goal for 2016-17 is \$35,000. Membership donations are vital to the program, which receives minimal funding from LCUSD. Donations will be used to pay for essentials, including sheet music, educational supplies, festival fees, scholarships, and choir room needs, such as the new chairs that were purchased with last year's donations.

Your contribution will help the program maintain its excellent standards and enrich our singers' experiences. Because it costs more than \$100 per student to run the choral program, CPA encourages each family to donate at least \$100. Depending on the amount, your donation may entitle you to a concert Family Pass and free concert DVDs or downloads. **In addition, your donation is tax deductible to the extent allowed by law.** We greatly appreciate your support to meet the ongoing needs of our choral students.

Thank you for your consideration!

Sue Wright, CPA Membership Chair

Questions? Email wrightsue@sbcglobal.net

CPA Taxpayer ID # 95-4760303

Membership Levels

Platinum	\$1000 – Platinum Members will receive program recognition, a Family Pass for all Concerts, and a DVD or digital download** of each of the four all-ensemble concerts.
Gold	\$500 – Gold Members will receive program recognition, a Family Pass for all concerts, and a Holiday Concert DVD or digital download.**
Silver	\$250 – Silver Members will receive program recognition and a Family Pass for all concerts.
Bronze	\$100 – Bronze Members will receive program recognition.
Other	Any amount – CPA will gratefully accept your donation in any amount.

Please complete the form below, enclose it with your check made payable to "LCHS Choral Parents Association" and mail it to: **LCHS CPA, P.O. Box 433, La Cañada, CA 91012.**

Your Name* _____

***Please print your name as you would like it to appear in the donor recognition section of our programs.**

Student Name(s) _____ Donation Amount \$ _____

✓ Choir(s): ___ 7/8 Vocal ___ 7/8 Women's ___ 9/12 Women's ___ Men's ___ Concert ___ Chamber

Telephone: _____ Email _____

****Platinum and Gold Memberships – please select recording type: ___ DVD ___ Digital Download**