



TARGETED FUNDS CAMPAIGN Contribution Form

Yes! I want to support choral music and The Heritage Chorale. I would like to make a contribution to the Chorale's Targeted Funds Program and help the Chorale to carry out specific portions of its program as described in the attached description of the Program's Targeted Funds.

Enclosed is my gift of \$_____. I would like to contribute to (select one or more):

[\$ _____] **The Concert Fund:** Enables the Chorale to present music that would ordinarily exceed the capabilities of the annual operational budget.

[\$ _____] **The Capital Fund:** Set aside for one-time purchase of material goods required by the Chorale.

[\$ _____] **The Outreach Fund:** Enables people to experience the Chorale's music who might otherwise be unable to do so.

I agree to the Chorale's Policies and Procedures that govern the Targeted Funds Program.

Signature: _____

Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____ Email: _____

Please make check payable to The Heritage Chorale, Inc. and mail to:

Heritage Chorale

Targeted Funds Program Chairperson

P.O. Box 1335

Framingham, MA 01701

- Please do not include my name as a contributor in the program.
- I would like to receive the Targeted Funds Program Annual Report.
- My company, _____, will match my gift. Its matching form is attached.
- Please call me. I wish to include The Heritage Chorale in my will or personal trust
- This gift is in honor of: _____
- This gift is in memory of: _____