Take your seat!

As The Shepherd School of Music looks toward the grand opening of the Brockman Music and Performing Arts Center’s new music building in fall 2020, we invite you to be a part of this transformative project by leaving your mark in the stunning new theater.

By supporting our seat naming initiative, your contribution will help enhance artistic programming, including future opera and orchestra productions, instrument purchases and more. Donors to this initiative will be recognized with a personalized plaque displayed at each seat. Pay tribute to a loved one, celebrate an anniversary, or honor your family or a favorite musician. Your plaque will make a lasting impression while supporting The Shepherd School of Music at Rice University.

If you would like to learn more about supporting the Brockman Music and Performing Arts Center or have any questions, please contact Rosemary Price, director of development, at 713-348-4992 or rprice@rice.edu. rumpac.rice.edu
## Seat Naming Initiative

To make your gift, please complete and return this form to: The Shepherd School of Music, Rice University, 6100 Main Street, MS-532, Houston, TX 77005-1827. Attention: Rosemary Price, director of development.

**I (WE) WISH TO SUPPORT THE BUILDING PROJECT BY MAKING A COMMITMENT** (payable up to five years).

Name(s): 
Address: 
Phone:  Email: 

**I (WE) WOULD LIKE THE FOLLOWING NAMES ENGRAVED ON SEAT PLAQUE(S)**

Write only one letter, punctuation mark or space per box. Please print clearly. *Please note: seat-naming rights do not include reserved seating for performances. Contributions are tax deductible as allowed by law.

<table>
<thead>
<tr>
<th>Seat sections:</th>
<th>Orchestra ($10,000)</th>
<th>Grand Tier ($5,000)</th>
<th>Gallery ($2,500)</th>
</tr>
</thead>
<tbody>
<tr>
<td>SEAT 1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SEAT 2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SEAT 3</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>SEAT 4</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total number of seats:  
Total contribution: $  
For more than 4 seats, please attach an additional page.

**PAYMENT**

- Enclosed check for the total amount payable to Rice University.
- Enclosed initial check for $          . Please bill me (us) annually.
- I (we) prefer to pay by credit card.
  - Credit card number:                      Exp. Date:    /   (mm/yy)  CVV    
  - Amount: $  
  - Signature  Date  

*(Required)*

**My/my spouse's company will match this gift.**

Matching gift company: 

A matching gift form:  is enclosed  will be sent  will be submitted online

**ACKNOWLEDGMENTS**

- I would like the person(s) I am honoring to receive notification of the gift.
  - Honoree name and contact information:  
- I prefer that my name not be acknowledged on printed materials or online.