



ELLSWORTH  
COMMUNITY  
MUSIC  
INSTITUTE

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

E-MAIL \_\_\_\_\_

PHONE \_\_\_\_\_

By signing below, I/we are committing to the following contribution or pledge to Ellsworth Community Music Institute:

\_\_\_\_\_ I am fulfilling the entire pledge at this time

\_\_\_\_\_ I will pay the pledge in three (3) installments over three (3) years with the second and third year billing one (1) year from the initial installment

\_\_\_\_\_ This gift is in memory of \_\_\_\_\_

\_\_\_\_\_ This gift is in honor of \_\_\_\_\_

\_\_\_\_\_ I would like my donation to remain anonymous

Checks may be made to ECMI or Ellsworth Community Music Institute, PO Box 56, Ellsworth, Maine 04605. For more information, please call 207-664-9258.

Signature \_\_\_\_\_

ECMI is a 501(c)(3) charitable organization.