

GIFT REPLY FORM

1. YOUR CONTACT INFORMATION

Name
Address
City, State Zip
Email
Credit my gift to: _____
<small>if no credit is given we will acknowledge you as listed above</small>

2. SELECT A FUND and/or Membership

NWS General Fund
Supports all NWS projects and initiatives

NWS Scholarship Fund

Become a Friend (Single or Family)
Become a FRIEND and enjoy these benefits:

- Purchase tickets to events a week before the general public
- Invitations to special events and author receptions
- 10% discount at Horizon Books downtown Traverse City
- 10% off your purchase at Morsels on NWS event days
- NWS bumper sticker

\$50 / Single
Purchase up to 2 tickets per event in advance of general public.

\$100 / Family
Purchase up to 4 tickets per event in advance of general public.

3. SELECT A CONTRIBUTION LEVEL

Sustaining Donor: \$15K/year for 3 years

- 6 complimentary tickets to all NWS events
- Invitations to post-event author dinners
- Invitation to private NWS events
- All other recognition benefits listed below
- Family Membership

Founders Circle: \$10K/year for 3 years

- 4 complimentary tickets to all NWS events
- All other benefits listed above
- Family Membership

Nobel: \$10,000

- Recognition benefits listed below
- Invitations to private NWS events
- Invitation to one post-event author dinner
- 2 complimentary tickets to all NWS events
- Family Membership

Pulitzer: \$5,000

- Recognition benefits listed below
- Invitations to private NWS events
- Invitation to one post-event author dinner
- Family Membership

Hugo: \$2500

- Recognition benefits listed below
- Invitations to private NWS events
- Family Membership

National Book : \$1,000

- Recognition in NWS program & event slideshows
- Family Membership

Quill: \$500

- Recognition in NWS program
- Single Membership

Other Amount: _____

4. PROVIDE YOUR PAYMENT INFORMATION

Total amount: US \$ _____

Check enclosed (payable to Writers Series of Traverse City*)

I prefer to pay by credit card

Visa, Mastercard or American Express #: _____

CVV: _____ Exp. Date: _____ Signature: _____

Name (as it appears on card): _____

Phone: _____ Email: _____

*Mail checks to: National Writers Series, 30 Cottageview Drive, Suite 231, Traverse City, Michigan, 49684