

SUPPORT THE AVALON'S 2024-2025 ANNUAL FUND

Please fill out the form below and mail to:

Avalon Theatre 5612 Connecticut Ave NW Washington, DC 20015

| | ontribution | nonprofit film center. to the Avalon Theatre's Annual Fund Campaign.] \$1000 | |
|--|-------------|---|--|
| Name: Address: Email: (We respect your privacy and do not share email addresses with third pa | | City/State/Zip: | |
| Preferred My check is enclosed. (payable to Avalon Theatre) | – or – | Please bill my MasterCard or Visa card. Card #: Signature: | |

Please contact me to discuss the Avalon's Planned Giving program.

The Avalon Theatre Project, Inc. is a 501(c)(3) nonprofit, donations to which are tax deductible to the fullest extent permitted by law.

Thank you for supporting the Avalon Theatre.