

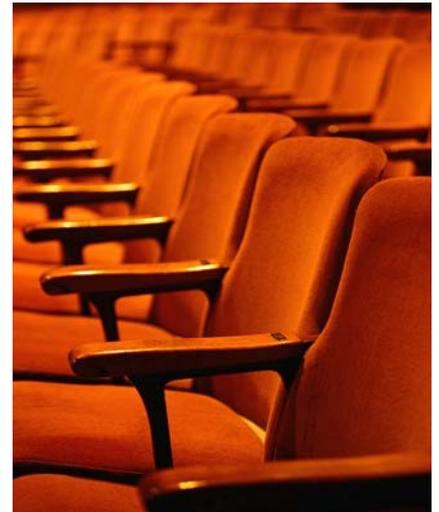


MONROVIA SCHOOLS FOUNDATION  
*Our Kids...Our Future*

# Fundraising Opportunity

## Help “Support our Schools”

**Opportunity to  
Purchase a Personalized  
Seat Name Plate**  
In the remodeled  
**Monrovia High School  
Louise K. Taylor Auditorium**



**Cost per seat plate:**

<b>Wildcat Center Orchestra Section (First 5 rows)</b>	<b>\$1,000</b>
<b>Right, Left, Back Orchestra Section</b>	<b>\$500</b>
<b>Balcony Section</b>	<b>\$250</b>

**All names of donors will be displayed in the foyer of the auditorium and on the website.**

**Please complete the attached form and return by mail to:**

**Monrovia Schools Foundation**  
PO Box 2447  
Monrovia, CA 91017  
(626) 471-2006  
[www.monroviaschoolsfoundation.org](http://www.monroviaschoolsfoundation.org)



MONROVIA SCHOOLS FOUNDATION  
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# Monrovia Schools Foundation

PO Box 2447

Monrovia, CA 91017

(626) 471-2006

[www.monroviaschoolsfoundation.org](http://www.monroviaschoolsfoundation.org)

**I would like to purchase a seat name plate in the remodeled  
Monrovia High School Louise K. Taylor Auditorium**

**Number of Seat Plates**

**Cost**

_____	<b>\$1,000 for Wildcat Center</b> (First 5 rows)	=	_____
_____	<b>\$500 for Right, Back, Left Orchestra</b>	=	_____
_____	<b>\$250 for Balcony</b> (All other rows)	=	_____

**Please provide us with your contact information:**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_

**Telephone** \_\_\_\_\_

**Please print clearly. Each plate may have 3 lines with a maximum of 25 total characters.  
Return this form with a check made payable to Monrovia Schools Foundation.**

\_\_\_\_\_

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