

**PATRONS TRIP PACKAGE**

\_\_\_\_\_ **PACKAGE(s): \$7,500 (\$4,500 tax-deductible)**

In recognition of their generous support, Patrons will be listed as a gala committee member in the theater program in addition to participating in all of the activities on the schedule.

The trip package also includes annual AFPOB "Friend" level privileges.

\_\_\_\_\_ I/we cannot attend but wish to support the work of the American Friends of the Paris Opera & Ballet with a fully tax-deductible contribution.

**CONTACTS**

NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_

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

**PAYMENT METHOD**

Enclosed is my check for \$\_\_\_\_\_ made payable to AFPOB.

Kindly charge my credit card for \$\_\_\_\_\_

MasterCard  Visa  American Express

Name on Card \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration \_\_\_\_\_ Security Code \_\_\_\_\_

Billing Address (if different from mailing address)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE RETURN TO:**  
American Friends of the Paris Opera & Ballet  
972 Fifth Avenue  
New York, NY 10075