

Membership Donation



Donation Amount

I would like to become a sustaining **Evergreen Member** with a monthly contribution of:

\$5/mo \$12/mo \$15/mo \$20/mo Other \$ ____/mo Network Partner: \$100/mo

I understand that my monthly support will continue until I make a change or cancel, and that my contribution will be processed around the same date each month, within four business days.

OR

I prefer to make a **one-time contribution**:

\$60 \$144 \$180 \$240 Other \$ ____ Network Partner \$1,200

Your Information

I listen to: News Classical OpenAir

First Name _____ Last Name _____

Address _____

City _____

Add Second Name or Business Name (optional) _____

Email _____

Payment Information

Please choose one:

Check enclosed (Payable to Colorado Public Radio)

Bank Account Draft

(Please send voided check or enter bank information below.)

Routing Number _____

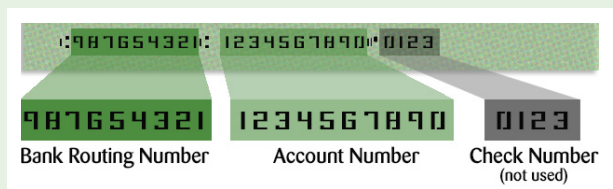
Account Number _____

Credit Card

Number _____

Expiration Date _____ CVV Code (back of card) _____

Signature _____



Please mail completed form and payment to:

Colorado Public Radio
Bridges Broadcast Center
Attn: Membership
7409 South Alton Court
Centennial, Colorado 80112

Questions? Please call Membership at (303) 871-9191

Thank you for your generous support. | www.cpr.org/donate