

Please print your name on the line that you wish to use and return the bottom portion of this letter and a check for \$150.00 made out to the Kewaskum School District to:

Kewaskum Theater  
P.O. Box 30  
Kewaskum, WI 53040

cut here ++++++cut here

Suggested engraving choices: (1 choice only) **PLEASE PRINT**

1. Your Name (personal or company) \_\_\_\_\_
2. In Honor of \_\_\_\_\_
3. In Memory of \_\_\_\_\_
4. Donated by \_\_\_\_\_

If you are a graduate of Kewaskum High School and would like to add the year you graduated, please put that on this line \_\_\_\_\_.