

Yes! I Want to Support Sarasota Art Museum's 25/26 Exhibition Season as a Sponsor!

Name(s)	Email		
Address			
City	StateZip	Phone	
Recognition Name	n Name □ I wish to remain anonymous		remain anonymous
Gift Options			
	000 or more for an exhibition(s) re in select educational materials, an		
Please review the 25/26 Ext support, and your sponsors	hibition Sponsorship Brochure, an hip level:	d list each of the gallery ex	chibitions that you wish to
	\$10,000 Silver Level	□\$15,000 Gold Level	☐\$25,000 Platinum Level
	\$10,000 Silver Level	□\$15,000 Gold Level	□\$25,000 Platinum Level
	\$10,000 Silver Level	□\$15,000 Gold Level	☐\$25,000 Platinum Level
☐ I wish to be recognize	d as a Gold Sponsor of four (4)	exhibitions in the 25/26 S	Season at the \$50,000 Level
_	d as a Platinum Sponsor of the		
☐ I wish to commit to the	above level of giving for a period o	of years	
Payment Method (gifts mus	t be received by March 15, 2026)		
Enclosed is a check made	e payable to Sarasota Art Museum for	\$	
Gift will come from a fou	ndation or donor advised fund in the a	amount of \$	
Charge my MasterCard, \			
Credit Card Number		Exp. Date	CVV
Billing Zip Code	Name on Card		_
Signature (required)			Date

Thank you for your gift!

Please return your completed form via email to your Ringling College Office for Advancement liaison or tmire@ringling.edu, or mail to Sarasota Art Museum, ATTN: Advancement, 1001 S Tamiami Trail, Sarasota, FL 34236.

Sarasota Art Museum of Ringling College of Art and Design, Inc. is an exempt organization as described in Section 501(c)(3) of the Internal Revenue Code; EIN 59-0637903. No goods or services are received in exchange for exhibition sponsorships.