

**The Chamber Music Society of Williamsburg
2020-2021 Season Subscription Form**

Name _____ New Subscriber

Mailing Address _____

City _____ State _____ Zip _____ Telephone _____

Email _____

Check this box to receive concert reminders by email,
rather than by mail

quantity

_____ Season Subscriptions (\$100 each) \$ _____

_____ Student Season Subscription (\$30 each) \$ _____

Contributions/Gift \$ _____

Total enclosed \$ _____

Please make checks payable to: The Chamber Music Society
of Williamsburg and mail to

The Chamber Music Society of Williamsburg
P. O. Box 1526
Williamsburg, VA 23187

Web site: www.chambermusicwilliamsburg.org

Contributors are listed in each Program at the following levels:

Associate (\$250 and above)

Patron (\$100 to \$149)

Friend (\$50 to \$99)

Donor (\$150 to \$249)

Supporter (\$1 to \$49)

In the Contributor List in the program, please list my name as: _____

Please do not list my name as a contributor.