



The New Holland Band
 P. O. Box 345
 New Holland, PA 17557

Associate Member Program of Support for 2020

Upon becoming a 2020 Associate Member, The New Holland Band will provide premiums according to the following schedule:

- a. Exclusive ticket availability for special concerts, including our magnificent 2020 Opening Concert
- b. Subscription to our newsletter
- c. First option for special concerts including the Holiday Pops Concert

Value	Patron	Opening Concert Tickets	Extra Tickets	Newsletter	Holiday Pops Concert December 18, 2020
\$15	Bronze	1		Yes	
\$25	Silver	2		Yes	
\$50	Gold	4		Yes	
\$100	Thunderer March	4		Yes	
\$250	Washington Post	4	Upon request	Yes	
\$500	Manhattan Beach	4	Upon request	Yes	Table for 2
\$1000	Stars & Stripes Forever	4	Upon request	Yes	Table for 8
\$2500	John Philip Sousa	4	Upon request	Yes	Table for 10

You don't want to miss our 2020 Opening Concert at 3:00 p.m. on Sunday, March 29, in the Manheim Township High School Auditorium in Neffsville; off North Rt. 501 and Valley Road, Lancaster, PA 17601. Concert tickets will be mailed in early March.

Don't wait---Get your concert tickets early with your Associate Membership! We must receive your completed form by February 1st, 2020 so we can include you in our Opening Concert Program listing.

Please make all checks payable to: **The New Holland Band, Inc.**

Detach and return with your membership check

2020 Associate Membership Form

Please check desired level of membership:

- | | |
|--|--|
| <input type="checkbox"/> Bronze Patron (\$15)
<input type="checkbox"/> Silver Patron (\$25)
<input type="checkbox"/> Gold Patron (\$50)
<input type="checkbox"/> Thunderer March Patron (\$100) | <input type="checkbox"/> Washington Post Patron (\$250)
<input type="checkbox"/> Manhattan Beach March Patron (\$500)
<input type="checkbox"/> Stars and Stripes Forever Patron (\$1000)
<input type="checkbox"/> John Philip Sousa Patron (\$2500) |
|--|--|

Name _____ Email: _____

Please print your name(s) as you wish to be listed in the Opening Concert Program

Name: _____
 Address: _____
 Address: _____
 City, State ZIP: _____

Please return in the enclosed envelope.