



SUBSCRIPTION TO JAZZ ARTIST RELIEF FUND

I wish to subscribe to the Napa Valley Jazz Society Jazz Artist Relief Fund (JAR) for a total donation of:

Check one: \$50 \$100 \$250 \$500 Other amount: _____

Donor's Name: _____

Mailing Address: _____

Email Address: _____

Telephone: _____

I hereby agree to pay the amount of my pledge by check payable to Napa Valley Jazz Society, JAR Fund. Please mail donation checks to P.O. Box 6080, Napa, CA 94581. The option of donating by credit card is not yet available.

While the initial focus of the fund is assistance to jazz artists residing North of San Francisco and Oakland, Donor hereby acknowledges that funds will be disbursed at the discretion of the Board of the Napa Valley Jazz Society to any individual or organization for the purpose of economic assistance to jazz artists residing anywhere.

Donations are non-refundable. Any surplus remaining at the end of this program will be held for future use in supporting jazz education and emergency health care for artists.

Signature of Donor: _____

Print Name: _____

After completing and signing this form, please return it to NVJS at info@nvs.org or by mail to the address shown below.