



DSO

Virtual Café



Please detach and place in the drop box
in the concert hall foyer or post to:

Dunedin Symphony Orchestra
PO Box 5571, Moray Place
Dunedin 9058

Alternatively you can email your contact
details to: office@dso.org.nz



OUR MISSION:

Co-creating superb musical experiences

CONTACT US:

PO Box 5571 Phone (03) 477 5623
Moray Place office@dso.org.nz
Dunedin 9058 www.dso.org.nz

Hanover Hall, 65 Hanover Street, Dunedin
(Cnr Hanover & Great King Streets)

Charities Registration Number CC34031

DSO Dunedin
Symphony
Orchestra



DSO

Dunedin Symphony Orchestra

Virtual Café

For the price of a cup of coffee you can
support your orchestra and help us
share magnificent music with others



DSO

Virtual Café

By setting up an automatic payment for a donation of \$5 per week, you will join others in the Virtual Café contributing to the long term financial wellbeing of the Dunedin Symphony Orchestra.

Each concert requires the hire of music. The average cost for the hire of one work is \$260. So, over the course of a year, your weekly virtual caffeine fix will pay for the cost of hire of one orchestral work. Your Virtual Café patronage will help the DSO continue to bring great music to you and others.

The DSO is a registered charity and your donations are tax deductible. We will provide you with an annual receipt for tax purposes.

YOUR ACTION PLAN:

- Step One:** Complete your details in the attached form and place it in the drop box in the concert hall foyer or return it to the DSO office. By doing this we can make sure you receive a receipt for your donation.
- Step Two:** Set up an Automatic Payment online, OR take the details shown below to your bank to complete an AP Authority.

For assistance with setting up your payment contact the DSO Office ph. 03 477 5623 or email office@dso.org.nz



AUTOMATIC PAYMENT DETAILS:

- Payee:** Dunedin Civic Orchestra Inc.
Bank Account: 06-0901-0016368-00
Particulars: (Your name)
Code: Virtual Café
Reference: Donation



Name: _____

Company: _____

Address: _____

Telephone: _____

Email: _____

Commencement date: ____/____/____

End date (if applicable): ____/____/____

Donation amount: **\$5 per week**

Date: ____/____/____

Signature: _____