



Etiwanda

Etiwanda High School Bands and Color Guard Booster Club

Dear _____

I have recently earned a performing spot in the Etiwanda High School Winter Color Guard Program. The Etiwanda High School Winter Guard has performed both nationally and internationally. In 2012 the Etiwanda Winter Guard was the WGASC Scholastic A Champion. We travel and compete throughout Southern California.

As many schools throughout the nation are eliminating both the visual and performing arts, Etiwanda High School continues to enthusiastically support students like me. My school is providing me the opportunities to grow as a performer. We spend many hours each week dedicating ourselves to becoming better. Winter Guard is helping me learn many other important skills that I can use off the performance floor like organization, time management and responsibility for myself and others. We all share a passion for performing and artistic excellence. We believe there is no such thing as good luck -- only GOOD SKILL!

Being a part of the Etiwanda High School Winter Guard will cost between \$400.00 to \$575.00 depending on which winter program I am in this season. This fee covers uniforms, some props, several months of instruction from specialized staff, transportation to competitions, and equipment maintenance. I am asking for your help to defray this cost. Etiwanda's Member Sponsorship program is a way for others to help me pay for my participation in this Award Winning High School Winter Guard Program.

Any amount you can give will help, and also keep in mind that your donation is tax deductible. Simply complete the bottom portion of this letter, detach, and return to the address listed below. The Treasurer will credit my account accordingly. The Etiwanda High School Winter Guard is an amazing life-changing experience, and I appreciate your consideration of my request.

Respectfully,

ETIWANDA WINTER GUARD MEMBER SPONSORSHIP

Yes, I will sponsor (name) _____ for 2017.

I have enclosed my sponsorship of: \$25___ \$50___ \$75___ \$100___ Other \$_____

Please make check payable to: EHS Bands

Name _____ Email _____

Address _____

City _____ State _____ Zip _____ Telephone _____

Return to: EHS Bands PO Box 327 Etiwanda, CA 91739

Additional information regarding EHS Winter Guard can be found on our website at www.etiwandabands.com