



**The
Endicott
Performing Arts
Center**

102 Washington Avenue
Endicott, NY 13760
Phone: 607-785-8903

**“Show You Care.... Buy a chair”
Order Form**

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ **Date:** _____

Please inscribe my chair(s) as follows:

In memory of Dedicated to Donated by

(Name) _____

Dated: _____

Received of _____

Amount: \$ _____

For _____ chair(s) located in The Endicott Performing Arts Center Balcony

Signed: _____ **EPAC Representative**