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In Honor of _____

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I wish to remain anonymous. Please do not publish my name and do not send a letter of acknowledgement to the person I am honoring.

Please list my name (as is below) in published donor acknowledgements.

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Contact information of the Honoree (must be completed to notify honoree of your gift):

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Check enclosed payable to **Hawaii Opera Theatre**

Visa MasterCard Discover American Express

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Fax this form to 808-596-0379 or mail with your donation to:

Hawaii Opera Theatre
ATTN: Development Department
HAWAII OPERA PLAZA
848 S. Beretania Street, Suite 301
Honolulu, HI 96813