The Folly Forever Seat Naming Campaign

For more than 116 years the Folly has been a cornerstone of Kansas City’s arts and architectural scene. Time has come to upgrade the theater’s infrastructure and amenities to match the exterior’s reclaimed stature and beauty. The endowment securing the Folly’s future benefits directly from your contribution to name your seat.

A Seat is Reserved Especially for You An engraved plate, inscribed with your or an honoree’s name plus a sentiment if you like, will mark your Folly Theater seat. The plaque not only honors the name inscribed upon it, but also the Folly’s rich history of artists and audience members who’ve come before you.

Choose a seat and let the legacy continue.

For more information, contact Brian Williams at 816-842-5500 or brian@follytheater.org; or go to FollyTheater.org/SeatNaming

Seat Engraving Example

IN LOVING MEMORY OF DR. TODD W. LIVINGSTON.
HUSBAND, FATHER, TENOR, FRIEND OF FINE ARTS.
YOUR LEGACY LIVES ON

What Would You Like Engraved On Your Seat Plaque?
Using capital letters, please fill in the lines with your inscription. 100 character limit
About Naming Rights
• Naming Rights does not entitle the donor to any use, discretion, control over or revenues from the named seat.
• Naming Rights expire after 10 years or the time at which the seats are replaced, whichever occurs later.
• The Folly Theater reserves editorial control over the text engraved on the seat plaque, including the length of the text. No advertising or copyrighted material is permitted.

Form

Date:_____________ Name: ______________________________________
Address: _________________________________________________________
City, State, ZIP: ____________________________________________________
Phone: ___________________ Email: _________________________________

I/ We hereby pledge a total of $______________ to the Folly Theater seat
campaign for the Folly Forever Endowment.

$500/seat Number of seats_____
$1,000/seat Number of seats_____
$1,500/seat Number of seats_____
$2,500/seat Number of seats_____
$5,000/seat Number of seats_____

Please choose your preferred payment terms:

Invoice me installments over (circle number of years):
One Two Three

Payment Options
Check (payable to Folly Theater Endowment Fund)
Credit Card: MC VISA AmEx Discover Credit Card Number:
_________________________ Name as it appears on card:
_________________________ Signature:
_________________________ Expiration Date:
_________________________ CVV Code: ___________________ Folly Theater is a 501(c)(3)
non-profit organization.