

G
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since 1894

For over 130 years, the Governing Members (GMs) have been leading individuals of the Chicago Symphony Orchestra family and served as its first established volunteer group. GMs provide elevated enthusiasm and support for the CSO's artistic excellence and educational innovation. Members receive opportunities to gain a deeper connection with CSO musicians and the organization, as well as with fellow members through special access, ticketing services, events and meetings.

GM Name	Employer
<i>OPTIONAL:</i> GM's Birthday (MM/DD/YY)	Title
Spouse/Partner	Work Address (<i>Preferred</i> ☐)
<i>OPTIONAL:</i> Spouse/Partner's Birthday (MM/DD/YY)	City, State, Zip
Preferred name for all CSO donor listings	Preferred Email(s) (<i>for Governing Member correspondence</i>)
Home Address (<i>Preferred</i> ☐)	Preferred Phone ☐ home ☐ business ☐ cell
City, State, Zip	

- ☐ I would like my preferred contact information included in the Governing Member Directory (*member-only access*).
- ☐ I am interested in learning more about serving on a Governing Member Committee.

I am excited to increase my impact with the Chicago Symphony Orchestra as a Governing Member because:

CSO Governing Member Commitment

My three-year commitment* totals: \$ _____

Payments due by June 30 each year: \$ 4500 2026/27 \$ 4500 2027/28 \$ 4500 2028/29

**Commitments made at any time during a given season will receive all GM benefits and privileges for a full calendar year from the date of commitment.*

GM commitments are fully tax-deductible, as benefits offered do not carry a fair market value.

Payment

- ☐ A check is enclosed for my 2026/27 pledge. *Please make checks payable to the Chicago Symphony Orchestra.*
- ☐ Payment will be distributed from my donor advised fund.
- ☐ Payment will be distributed from my IRA.
- ☐ Please send me a pledge reminder during the following month (prior to June 30 each season): _____
- ☐ I would like to set up an automatic payment plan. Please have a CSO staff member contact me.
- ☐ Please charge my credit card for my 2026/27 pledge: ☐ AmEx ☐ Discover ☐ MasterCard ☐ Visa

Card Number

Expiration Date

Signature