

## Bravo Society Membership Form

Please complete this form either by hand or electronically and return the printed form to the address below.

The information you provide will be held in strictest confidence.

If you have any difficulty saving or printing the form, please contact us at

[development@pacificopera.ca](mailto:development@pacificopera.ca) (250.382.1641, ext. 205 or 214).

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I AM PLEASED TO ACCEPT MEMBERSHIP IN THE BRAVO SOCIETY ON THE FOLLOWING BASIS:

(Check all that apply)

I have included the Pacific Opera Victoria Foundation or the Pacific Opera Victoria Association in my will.

I have arranged an annuity, trust or other residual interest gift.

I have named the Pacific Opera Victoria Foundation or Pacific Opera Victoria Association as a beneficiary of a life insurance policy.

I have included a copy (or portion) of my document(s) that pertain to my charitable bequest. (optional)

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My name (our names) should appear as follows

I/we wish to remain anonymous

MEMBER(S) INFORMATION:

Name(s)

Street Address

City

Postal Code

Email

Phone

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return your completed form to  
Pacific Opera Victoria Foundation, 925 Balmoral Road, Victoria, BC V8T 1A7