



## DELACORTE THEATER SEAT NAMING

As part of The Public Theater’s Forever Public Campaign, we are thrilled to offer donors the opportunity to participate by personalizing seats at the historic Delacorte Theater in Central Park. You may submit an application to participate in The Delacorte Theater Seat Naming effort using the attached form. All applications will be subject to the Delacorte Theater Seat Naming Policy set forth below.

If you have any questions or are interested in more information, please contact [capitalcampaign@publictheater.org](mailto:capitalcampaign@publictheater.org).

### **Delacorte Theater Seat Naming Policy:** *(Please read before signing)*

By submitting this form, I acknowledge that my donation will be used to support The Public Theater’s Capital Campaign—which includes but is not limited to—renovation of The Delacorte Theater. This pledge does not in any way impact existing Public Theater membership benefits or levels and is above and beyond any existing annual commitments to The Public Theater. Payment must be received in full before inscriptions can be affixed to the seat.

I understand that the plaque is symbolic of the donation and does not constitute “ownership” of the seat, including without limitation, reserving use of the seat containing such plaque for any performances. Plaque locations will be determined at The Public Theater’s sole discretion. The Public Theater retains the right to relocate the location of the plaque at any time, as well as, in rare instances, remove the inscription on a seat.

The Public Theater will honor all applications on a first come, first serve basis. Forms will be accepted starting in October 2024. The Public Theater reserves the right to limit the number of seats that any one donor household may name.

I understand and agree that the rights and obligations related to this donation are subordinate to any applicable agreements between The Public Theater and the City of New York, now existing or that may be entered into hereafter.

Plaques will be installed beginning in Summer 2026. The seat shall bear the plaque with the inscription for a term ending in 2046, subject to The Public Theater’s ongoing rights in the space.

A maximum of 48 characters (spaces not included in this count) is permitted as a proposed inscription on the plaque. Logos, images, graphics, and objects will not be permitted. No commercial statements or advertising of any kind are permitted. No language that is obscene, indecent or profane, or which may tend to arouse hatred or ill will against any group or individual on the basis of their sex, race, creed, national origin, religion, sexual orientation, sexual identity, or affectional preferences will be permitted.

The Public Theater will select the font and size in its sole discretion. Inscriptions upon seats shall be restricted to simple messages such as

1. Statement of a person's or pet's name
2. In Memory Of
3. In Honor Of
4. The "Doe" Family, or similar
5. Loving Son, Daughter, Mother, Father, Grandfather, Grandmother, etc.
6. Donated / Supported / Adopted by Donor or Family Name
7. Statement that describes the honoree
8. Statement of well wishes to honoree (birthday, anniversary, proposal, holiday, etc.)

Any further such statements shall be agreed upon in writing between Donor and The Public. The final inscription is subject to the approval of The Public Theater. Once inscribed on the seat, donors will not be able to amend their inscriptions.

**DELACORTE THEATER SEAT NAMING EFFORT**

Applicant Information:

**Name:**

**Address:**

**Email:**

**Phone:**

Proposed Inscription(s) for Plaque(s): *(Maximum of 48 characters, not including spaces)*

**Plaque 1:**

**Plaque 2:**

**Plaque 3:**

**Plaque 4:**

Payment: The total donation of \$ \_\_\_\_\_ (\$5,000/each seat plaque) shall be made in the form of a check or by credit card. Please make your check payable to: **The Public Theater with "Capital Campaign"** in the Memo line or alternatively complete the below information for credit card payment.

**Name (as it appears on credit card):**

**Credit Card Number:**

**Expiration Date:**

**CVV:**

Select a Payment Option:

Single Payment

Quarterly Payments (through 12/31/25)

Monthly Payments (through 12/31/25)

Other (through 12/31/25)

For information on submitting payment via wire transfer or providing a gift of stock, please email us at [capitalcampaign@publictheater.org](mailto:capitalcampaign@publictheater.org).

Please return this form to:

Attn: Development Department  
The Public Theater  
425 Lafayette Street  
New York, NY 10003

My signature below indicates that I have read this document in its entirety, and fully understand and agree to abide by the Delacorte Theater Seat Naming Policy (provided above).

**Signature:**

**Date:**