

KINDLY
respond
by NOVEMBER 1

INTERFAITH
Caregivers
GREATER MERCER COUNTY

IN-PERSON TICKETS

I would like to purchase _____ in-person tickets at the rate of \$75 per person.
(Includes dinner and celebration)

DINNER CHOICES: Horseradish Encrusted Salmon with Dijon Sauce QTY _____
Roasted Chicken with Mushroom Marsala Sauce QTY _____

VIRTUAL TICKETS

I would like to purchase _____ virtual tickets at the rate of \$75 per person.
(Includes virtual program link and dessert.)

Includes dessert surprise for in home enjoyment - details to follow

_____ I am unable to attend. Enclosed please find my donation of \$_____.

RESERVATION INFORMATION

SAME AS SPONSORSHIP FORM

Name _____

Contact Person _____

Mailing Address _____

City _____ State _____ Zip _____

Telephone _____ Email _____

PAYMENT INFORMATION

PAYMENT ENCLOSED BILL ME

Credit Card Type (please circle): Visa Mastercard Discover Amex

Name on Card _____

Credit Card Number _____

Signature _____ Exp Date _____

Billing Address _____

sponsorship

Presenting Sponsor _____ \$7,500

Sunlight Sponsor _____ \$5,000

Twilight Sponsor _____ \$3,500

Moonlight Sponsor _____ \$2,500

Starlight Sponsor _____ \$1,000

Candlelight Sponsor _____ \$600

advertisement

Full-Page Ad _____ \$500

Half-Page Ad _____ \$300

Quarter-Page Ad _____ \$200

Business Card _____ \$100

Total Purchase _____

RESERVATION INFORMATION

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Mailing Address _____

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PAYMENT INFORMATION

PAYMENT ENCLOSED BILL ME

Credit Card Type (please circle): Visa Mastercard Discover Amex

Name on Card _____

Credit Card Number _____

Signature _____ Exp Date _____

Billing Address _____