

Annual Spring Gala



Friday, March 8, 2013
National Building Museum
Washington, D.C.

To reserve your table, please complete this form and mail, fax or e-mail to:

Prevent Cancer Foundation Annual Spring Gala
1600 Duke Street, Suite 500, Alexandria, VA 22314
fax: (703) 836-4413

linda.chastain@preventcancer.org

Please reserve: (Sponsor benefits attached separately)

- _____ **Premier Benefactor-\$100,000** (\$97,200 tax-deductible)
(Premium Table for twenty and additional table for eight)
- _____ **Major Benefactor-\$50,000** (\$48,000 tax-deductible)
(Premium table for twenty)
- _____ **Benefactor Plus-\$35,000** (\$33,00 tax-deductible)
(Two Premium Tables for ten)
- _____ **Benefactor-\$25,000** (\$24,000 tax-deductible)
(Premium table for ten)
- _____ **Patron-\$10,000** (\$9,000 tax-deductible)
(Table for ten)
- _____ **Sponsor-\$7,000** (\$6,200 tax-deductible)
(Table for eight – **Limited number of tables available at this level.**)

SPONSOR:

(Please print name as you wish it to appear in all printed materials.)

Contact Name:

Address:

City, State, Zip

Daytime Phone:

Fax:

e-mail:

Please indicate form of payment:

- ☐ Enclosed is a check for \$ _____, payable to Prevent Cancer Foundation.
(Tax ID #52-1429544)
- ☐ Please charge \$ _____ to my: ☐ American Express ☐ Discover ☐ MasterCard ☐ Visa
Account # _____ Exp. Date: _____
- ☐ Please print name on card:
- ☐ We will be unable to participate, but enclosed is a check for: \$ _____
(Upon receipt of your check, an acknowledgment for tax purposes will be mailed to you.)
- ☐ Please send an invoice to:
In the amount of: \$ _____