

SPONSORSHIP RESPONSE CARD

INDICATE YOUR SPONSORSHIP LEVEL

(Please refer to the booklet for detailed sponsorship information)

- PINNACLE SPONSOR** (\$125 k)
- PRODUCING SPONSOR**..... (\$ 50 k)
- MAJOR or AWARD SPONSOR** ... (\$ 25 k)
- STAR SPONSOR**..... (\$ 15 k)
- SUPPORTING SPONSOR**..... (\$ 10 k)
- BENEFACTOR SPONSOR** (\$ 5 k)
- PATRON SPONSOR**..... (\$ 1 k)

I / We are unable to attend, but wish to contribute the following amount:

\$ _____

Do you wish to take advantage of your entitled benefits? (Please check one)

Yes **No** NOTE: _____

COMPLETE YOUR BILLING INFORMATION

FIRST NAME: _____

LAST NAME: _____

ORGANIZATION: _____

ADDRESS: _____ SUITE _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ FAX _____

E-MAIL _____

CREDIT CARD# _____ EXPIRES _____

- VISA MASTERCARD AMEX DISCOVER

Please charge my credit card in the amount of \$ _____

Enclosed please find my check in the amount of \$ _____

You may contact me regarding making a donation to the silent / live auction. Return this completed card with your payment. Your tax deductible portion is \$300 per seat. **All checks payable to Desert AIDS Project.**