

# BIG WISH GALA RESERVATION FORM

Saturday, May 22, 2010

Please send completed form to Katie Kelso via mail (address at the bottom of this page), fax to 614-923-0573, or e-mail to [bigwish@makeawishohio.org](mailto:bigwish@makeawishohio.org) by **May 14, 2010** for best seating.



## RESERVATION INFORMATION

- HOPE SPONSOR:** 16 Guests (2 tables) - \$25,000 (\$21,800 tax deductible)  
Includes 16 VIP reception passes and opportunity to sponsor two wish children.
- STRENGTH SPONSOR:** 10 Guests (1 table) - \$15,000 (\$13,250 tax deductible)  
Includes 10 VIP reception passes and opportunity to sponsor one wish child.
- WISH SPONSOR:** 8 Guests (1 table) - \$10,000 (\$8,500 tax deductible)  
Include four VIP reception passes and opportunity to sponsor one wish child.
- JOY SPONSOR:** 8 Guests (1 table) - \$6,000 (\$4,550 tax deductible)  
Includes two VIP reception passes.
- TABLE SPONSOR:** 8 Guests (1 table) - \$4,000 (\$2,600 tax deductible)
- SUPPORTER:** \$500 / guest (1 seat, 10 per table) (\$325 /guest tax deductible). Total Guests: \_\_\_\_\_
- UNABLE TO ATTEND.** Please accept my donation to the Make-A-Wish Foundation® of Greater Ohio, Kentucky & Indiana for \$\_\_\_\_\_ (100% tax deductible). Additional sponsorship opportunities are available.

## PAYMENT INFORMATION - Please mail or e-mail my reservation confirmation to:

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 E-mail \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Please include me in future e-mail communications regarding Make-A-Wish Foundation® news and events.

I am enclosing a check for \$\_\_\_\_\_ (Payable to Make-A-Wish Foundation®)

Please charge \$\_\_\_\_\_ to my:  Visa  MasterCard  American Express  Discover

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

## BIG WISH GALA ATTENDEES

Please seat the following people at my table:

Name	Email	Filet & Lobster Ravioli	Gluten Free	Filet Only	Vegetarian
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Space is limited.

Guests must be 21 years of age or accompanied by an adult to attend.

Make-A-Wish Foundation® of Greater Ohio, Kentucky and Indiana  
 2545 Farmers Drive, Suite 300  
 Columbus, Ohio 43235

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TABLE NAME — \_\_\_\_\_

Name1 \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name2 \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name3 \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name4 \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name5 \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name6 \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name7 \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name8 \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name9 \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name10 \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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