

Beauty *of* Life 2008

Sponsor / Table Captain Reply Form

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Seating reservation and additional contributions (please indicate number of each):

_____ \$5,000 PLATINUM (sponsor for two tables of 10 includes priority seating, private visit with Carson, valet, drinks & recognition)

_____ \$2,500 GOLD (sponsor for 10 includes premier seating, private visit with Carson, valet & event recognition)

_____ \$1,000 SILVER (sponsor for 10 includes preferred seating & recognition)
I will sponsor this table myself and invite guests.

_____ \$1,000 TABLE CAPTAIN (sponsor for 10 includes preferred seating & recognition)
I will commit to putting a table together for 10 guests at \$100 per ticket.

_____ \$100 individual seat

_____ Donation to Hospice Austin: Amount \$ _____

Method of Payment:

_____ **Check made payable to Hospice Austin**

_____ **Credit card (please circle one) MC Visa Zip Code: _____**
Card # _____ Exp date: _____
Total amount charged: \$ _____

Please return to:

Hospice Austin, Attn: Grace Holland,

4107 Spicewood Springs Rd, Ste 100, Austin, TX 78759

(512) 342-4753 phone, (512) 795-2803 fax, gholland@hospiceaustin.org, www.hospiceaustin.org