



## Please reserve:

\_\_\_\_\_ seat(s) at \$75\* each. \$ \_\_\_\_\_

I cannot attend but wish to contribute. \$ \_\_\_\_\_

I would like to sponsor the attendance of  
\_\_\_\_\_ teacher(s) at the event at \$50 each. \$ \_\_\_\_\_

*(Each sponsorship includes three raffle tickets for the teacher.)*

I wish to purchase \_\_\_\_\_ raffle ticket(s) at \$5 each. \$ \_\_\_\_\_

TOTAL AMOUNT ENCLOSED \$ \_\_\_\_\_

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NAME

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ADDRESS

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CITY

STATE

ZIP

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TELEPHONE

EMAIL

Enclosed is my check

*(Please make payable to the AHRC New York City Foundation.)*

I wish to pay with  AmEx  Visa  MC  Discover

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NAME ON CARD

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ACCOUNT NO.

EXP. DATE

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SIGNATURE

*Your company may match the tax-deductible portion of your gift;  
inquire where you work.*

**\* \$45 OF EACH TICKET IS TAX-DEDUCTIBLE. QUESTIONS? CALL 212-780-2690.**