



Mary's Center presents
2009 Noche Tropical

*Celebrating Our Legacy:
Saving Lives and Strengthening Communities,
One Family at a Time*

Response Form

I would like to support the work of Mary's Center with the following contribution:

____ **Legacy Sponsor~ \$50,000**

Twenty tickets to the event; access to designated VIP lounge area; invitation for six guests to *Noche Tropical* Pre-Event; complimentary overnight stay at the Mandarin Oriental the evening of the event; acknowledgement as the legacy sponsor on all collateral materials and the night of the event; additional recognition outlined in sponsorship benefits

____ **Community Builder Sponsor ~ \$20,000**

Ten tickets to the event; access to designated VIP lounge areas; invitation for two guests to *Noche Tropical* Pre-Event; acknowledgement as community builder sponsor on collateral materials and the night of the event; additional recognition outlined in sponsorship benefits

____ **Partner Sponsor ~ \$10,000**

Ten tickets to the event; additional recognition outlined in sponsorship benefits

____ **Advocate Sponsor ~ \$5,000**

Five tickets to the event; additional recognition outlined in sponsorship benefits

____ **Friend Sponsor ~ Individual Ticket for \$250** (Please indicate number: _____)

One ticket to the event

____ **Contribution**

I am unable to attend but would like to support Mary's Center. Enclosed is my contribution of \$_____.

Please list me by (check one): Name Company Please keep my contribution anonymous

Name (please print exactly as you would like to be listed in event materials) Title

Company (please print exactly as you would like to be listed in event materials)

Address

City State Zip

Contact Name (if different from above) Phone (include area code) Fax Email

Payment Information

My payment in the amount of \$_____ is enclosed/will follow (please circle one). Please make your check payable to "Mary's Center".

Please charge \$_____ to my (circle one): *Visa* *MasterCard* *Amex*

Name on Credit Card _____

Credit Card # _____ Exp. Date _____

Signature _____

Please return this form via fax to (202) 234-3678 or via mail with payment to:
Maria Gomez • Mary's Center • 2333 Ontario Road, NW • Washington, DC 20009.

For more information on *Noche Tropical*, please visit www.maryscenter.org or contact Ashley Griffith by phone at (202) 420-7052 or email at agriffith@maryscenter.org.

Mary's Center is a not-for-profit organization under section 501(c)(3) of the Internal Revenue Code. (Federal ID # 52-1594116). A portion of your contribution will be tax-deductible to the fullest extent of the law.