

ST. AMBROSE CATHOLIC SCHOOL GALA

Kindly respond on or before September 25, 2015.

If you have questions, please contact Danna Jankowski at 713.686.6990 or djankowski@sashornets.org.

Discounted room rate of \$144 available for the evening of our event. Please contact the JW Marriott for reservations.



Name _____

Email _____ Phone _____

UNDERWRITING

Imperial \$5,000
2 tables (seating for 20)
VIP seating
10 valet parking passes

Angelic \$2,000
Reserved seating for 6
VIP seating
3 valet parking passes

Docere \$3,000
1 table (seating for 10)
VIP seating
5 valet parking passes

Ambrosian \$500
Reserved seating for 2
VIP seating
1 valet parking passes

\$1,500 - Preferred table placement for 10 guests \$ _____

____ No. of individual seats (\$125 each; open seating - no table assignments) \$ _____

I am unable to attend but enclosed is my donation \$ _____

Total \$ _____

Please make checks payable to St. Ambrose Catholic School

Please charge my: AMEX Visa Mastercard Discover

Name on card _____

Card Number _____ Exp. Date _____ CVV _____

SEATING REQUEST

Preferred table placement for 10 guests.
\$1,500 per table. Please enclose payment in full.

Please provide name and email address for all individuals to be seated at table.

NAME

EMAIL

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____