

Payment

Make reservations online at www.upwardboundhouse.org

- My check for \$_____ is enclosed.
Please make checks payable to *Upward Bound House*
Tax I.D. #95-4288926
- Please charge \$_____ to my credit card: Visa MasterCard
Sorry, we are unable to accept American Express at this time.

Card No. _____

Expiration Date _____ Sec Code _____

Name on Card _____

Signature _____

Inquiries and Mailing

www.UpwardBoundHouse.org
upwardboundhouse@eventsbyone.com
(310) 659-5517

Mail Payment to:
PO Box 17018, Beverly Hills, CA 90209



A Night in New Orleans

THURSDAY, OCTOBER 20, 2011

Response Card

Make reservations online at www.upwardboundhouse.org

Sponsorship Opportunities

Mayor Presenting Sponsor\$25,000

Tickets for 10 at reserved table
Speaker in program to address guests
Logo or name recognition on all printed materials
Lead logo or name recognition at event
UBH newsletter recognition
Additional signage opportunities

Councilmember Sponsor\$15,000

Tickets for 10 at reserved table
Logo or name recognition on event banners and signage
Logo or name recognition at event
UBH newsletter recognition
Additional signage opportunities

Commissioner Sponsor\$10,000

Tickets for 10 at reserved table
Logo or name recognition on event banners and signage
Logo or name recognition at event
UBH newsletter recognition
Additional signage opportunities

Community Leader Sponsor\$5,000

Tickets for 10 at reserved table
Name recognition at event
UBH newsletter recognition

Community Activist Sponsor\$1,000

Tickets for 5
Name recognition at event
UBH newsletter recognition

Individual Tickets

- Please reserve _____ Individual Ticket(s) at \$250 each.
Each seat is \$40 non tax deductible

Donations

- Enclosed is a contribution of \$ _____ to support Upward Bound House.
We are unable to attend.

Permit on File with Charitable Services Section

Reservations

Make reservations online at www.upwardboundhouse.org

Please List My Name As:

Title _____

Company _____

Address _____

City _____ State _____ Zip _____

Business Phone _____

Fax _____

Home Phone _____

Mobile _____

E-Mail _____

Please turn to back side for Payment Information