

Picnic Under the Stars Commitment Form

(Piease i Name(s)	,						
Name (a	s it will a	appear in print for	r recognition):				
Email:							
				Fax:			
				Assistant's Phone:			
Assistan	t's Email	l:					
Tickets \$4,000 Table Sponsor \$400 Ticket - Number of ticket Sponsorships (please circle) \$50,000 Platinum Sponsor \$25,000 Gold Sponsor \$10,000 Silver Sponsor \$5,000 Bronze Sponsor			fumber of tickets	Underwriting (please circle) \$15,000 Valet Underwriter			
Please C	harge C	Our Credit Card	(or please send	a check to	the address below)		
(Circle)	Circle) Visa MasterCard American Ex		American Exp	ress	Discover		
		_					
Card Nu	mber:				Expiration Date:		
3-digit Security Code: Signature:							
Please e	mail com	ipleted form to sa	ırah.philippe@co	ancer.org	or mail to American Cancer	Society Attn: Sarah Philippe at 4550 E. Bell Road,	

Suite 126 | Phoenix, AZ 85032



4550 E. Bell Road, Suite 126, Phoenix, AZ 85032 cancer.org t) 602.586.7413 f) 602.778.7699 Gala Co-chairs: Courtney Bannard | Dr. Linda Greer picnicunderthestars.org

