



Stephen Sondhi

NEW YORK CITY CENTER GALA CELEBRATION
APRIL 26, 2010

Gala Co-Chairs
Bobbie and Lew Frankfort
Perry and Marty Granoff
Stacey and Eric Mindich
Mary Jo and Ted Shen
Joanne Woodward

Gala Committee
Sherry and Stephen Jacobs
Monica and Ray Lamontagne
Patricia and Jesse Lovejoy
Stephanie and Fred Shuman
Judy and Fred Wilpon

Please mark the number of tables/tickets you would like to reserve:

Vice Chairman Table for ten at \$50,000 (\$45,100 is tax-deductible)
- Prime Orchestra performance seating
- Dinner at the Plaza Hotel following the performance
- Pre-performance cocktail reception
- Recognition as Vice Chairman on all Gala materials

Golden Benefactor Table for ten at \$25,000 (\$20,100 is tax-deductible)
- Orchestra performance seating
- Dinner at the Plaza Hotel following the performance
- Pre-performance cocktail reception
- Recognition as Golden Benefactor on all Gala materials

Silver Benefactor Table for ten at \$15,000 (\$10,100 is tax-deductible)
- Grand Tier performance seating
- Dinner at the Plaza Hotel following the performance
- Pre-performance cocktail reception
- Recognition as Silver Benefactor on all Gala materials

Benefactor Ticket(s) at \$2,500 (\$2,010 is tax-deductible)
- Orchestra performance seating
- Dinner at the Plaza Hotel following the performance
- Pre-performance cocktail reception
- Recognition as Benefactor on Gala materials

Patron Ticket(s) at \$1,500 (\$1,010 is tax-deductible) - SOLD OUT!
- Grand Tier performance seating
- Dinner at the Plaza Hotel following the performance
- Pre-performance cocktail reception
- Recognition as Patron on Gala materials

Sponsor Ticket(s) at \$500 (\$210 is tax-deductible)
- Mid-Mezzanine performance seating
- Pre-performance cocktail reception

Please note, all tables and tickets are subject to availability.

I/We cannot attend but would like to make a contribution in the amount of \$

Name (as you wish to be listed)

Title/Company

Address

City State Zip Code

Daytime Telephone Fax

Email

Check is enclosed in the amount of \$ Payable to New York City Center

I/We wish to pay by Credit Card: AMEX MC VISA

Card Number Expiration Date

Signature

Please return to:

Susan Strebel

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