

Saint Therese Foundation Gala Registration Form

Remit to the Saint Therese Foundation by September 17.
1660 South Highway 100 • Suite 103 • St. Louis Park, Minnesota • 55416

Name: _____ Organization: _____

Address: _____ City, State, Zip: _____

Email: _____ Phone: _____

Selected participation level

☐ \$10,000 – Benefactor table host for 10 guests

☐ \$2,500 – Preferred table host for 10 guests

☐ \$5,000 – Guarantor table host for 10 guests

☐ \$1,500 – Patron table host for 10 guests

Name or organization to recognize in program: _____

PATRON HOST PRICING INCREASES SEPTEMBER 10 TO \$1,750

☐ \$1,000 – Ruby sponsorship with 4 tickets

☐ \$150 – Individual ticket

☐ \$750 – Emerald sponsorship with 2 tickets

Quantity of individual tickets: _____

INDIVIDUAL PRICING INCREASES SEPTEMBER 10 TO \$175

Total enclosed amount: \$ _____

\$70 PER ATTENDEE NOT TAX-DEDUCTIBLE. SPONSORSHIP FAIR MARKET VALUE FOUND ON RECEIPT.

☐ Check payable to **Saint Therese Foundation** enclosed

☐ Please charge my credit card*: ☐ Visa ☐ Mastercard ☐ American Express ☐ Discover

*FOR A MORE SECURE TRANSACTION, PAY ONLINE: SAINTTHERESE.ORG/GALA

Credit card number: _____ Billing zip: _____ CVV: _____

Exp. Date: _____ Signature: _____

Guest Information*

1. Name: _____ Email: _____

2. Name: _____ Email: _____

3. Name: _____ Email: _____

4. Name: _____ Email: _____

5. Name: _____ Email: _____

6. Name: _____ Email: _____

7. Name: _____ Email: _____

8. Name: _____ Email: _____

9. Name: _____ Email: _____

10. Name: _____ Email: _____

*LIST MEAL REQUESTS AFTER NAME. V: VEGETARIAN • GF: GLUTEN-FREE • LF: LACTOSE-FREE