



R.S.V.P. (SUBMIT BY SEPTEMBER 18, 2009)

Yes, you can count on my support as a sponsor of the **2009 A Night of Hope Gala: Going for the Gold** to benefit the **Juvenile Diabetes Research Foundation Capitol Chapter**.

SPONSORSHIPS

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TICKETS

- Individual Tickets # _____ @ \$400 each
- "Young Benefactors" Tickets # _____ @ \$250 each

I cannot attend, but would like to donate \$_____ in support of JDRF.

NAME _____

COMPANY _____

SPONSOR NAME _____
(AS YOU'D LIKE IT LISTED IN EVENT MATERIALS)

BILLING ADDRESS _____

CITY _____ STATE _____ ZIP _____

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METHOD OF PAYMENT (payment must be received prior to event)

Make checks payable to: Juvenile Diabetes Research Foundation

Or charge my: VISA MASTERCARD AMERICAN EXPRESS DISCOVER

Credit Card Number: _____ Exp. Date ____/____

Please mail or fax to:

JDRF Capitol Chapter (Attn: NOH Gala)
1400 K Street, NW Suite 725, Washington, DC 20005
Tel: (202) 371-0044 Fax: (202) 371-0046 Email: czager@jdrf.org