

Please send completed forms to: SOAR! Hecker Center for Ministry • 3025 4th Street, NE Suite 14 • Washington, DC 20017  
Sister Kate Clancy, IHM Special Events Coordinator at 202.529.7627 or at kclancy@soar-usa.org.  
fax 202.529.7633 • email kclancy@soar-usa.org • www.soar-usa.org for online registration. For more information please contact

10. \_\_\_\_\_  
9. \_\_\_\_\_  
8. \_\_\_\_\_  
7. \_\_\_\_\_  
6. \_\_\_\_\_  
5. \_\_\_\_\_  
4. \_\_\_\_\_  
3. \_\_\_\_\_  
2. \_\_\_\_\_  
1. \_\_\_\_\_

PLEASE LIST ALL 10 GUESTS NAMES, ADDRESSES AND TELEPHONE NUMBERS ON THE LINES PROVIDED

*Seating* Tables seat ten. Seating is limited and guest lists are requested as early as possible.  
Reservations will be honored in the order received but must be received no later than October 14, 2011.  
 I wish to be seated by the Committee.  
 I wish to be seated at the table of \_\_\_\_\_  
 I have purchased \_\_\_\_\_ tickets. My guests are listed below.



# 25TH ANNIVERSARY SOAR! AWARD DINNER

## *Benefiting the Aged and Infirm Religious*

- Silver Anniversary Sponsor* ⌘ \$25,000  
*Premier Table for 10 at the Dinner*  
*Complimentary silver page ad in the Award Dinner Journal*
  - Sponsor* ⌘ \$10,000  
*Prime Table for 10 at the Dinner. Recognition in Journal.*
  - Benefactor* ⌘ \$5000  
*Four Tickets. Recognition in Journal.*
  - Patron* ⌘ \$3000  
*Two Tickets. Recognition in Journal.*
  - \_\_\_\_\_ *Individual Reservation (s)* \$400 each
  - \_\_\_\_\_ *Under 40* \$300 each
  - I am unable to attend, but would like to sponsor a religious \_\_\_\_\_ \$400 each
  - I am unable to attend, but would like to support SOAR! with my gift of \$\_\_\_\_\_
- For advertising options in the SOAR! Dinner Journal please see below.

*Indicate name as it should be listed in the SOAR! Dinner Journal. Please complete both sides.*

Name \_\_\_\_\_

Title \_\_\_\_\_ Affiliation \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Is this your \_\_\_\_\_ home or \_\_\_\_\_ business address.

*Please make your check payable to SOAR! or provide credit card information:*

Name on Account \_\_\_\_\_ Amount \_\_\_\_\_

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

*SOAR! is a 501(c) (3) organization and contributions are deductible as provided by law.*

I wish to place an ad in SOAR!'s 25th Anniversary Award Dinner Journal:

- Silver Page \$2,500
  - Full Page \$1,000
  - Half Page \$750
  - Quarter Page \$500
  - Business card \$250
- Ad reservations and art are due on or before October 1, 2011.*