

YES! I would like to join the Leadership Circle.

Please mark your preferred leadership level:

- ABOVE AND BEYOND SUPER ANGEL \$_____
- \$50,000 (and above) LEAD SPONSOR

Exclusive preview of art auction | Table for 10 | Your logo on a CITYarts mural plaque | Vik Muniz limited edition signed print Inside color ad on front or back cover of the Annual Gala Journal | Listing in Invitation & Annual Gala Journal

• \$25.000 - ANGEL

Exclusive preview of art auction | Table for 10 | Two-page color ad in Journal | Daniel Libeskind Freedom Tower limited edition signed print | Listing in Invitation & Annual Gala Journal

• \$15,000 – SPONSOR

Exclusive preview of art auction | Table for 8 | Full-page color ad in Journal | Daniel Libeskind Freedom Tower limited edition signed print | Listing in Invitation & Annual Gala Journal

\$10,000 — BENEFACTOR

Table for 8 | Full-page color ad in Journal | Listing in Invitation & Annual Gala Journal | Peter Sis print

\$5,000 — AMBASSADOR

6 tickets | Half-page color ad in Journal | Listing in Invitation & Annual Gala Journal

• \$2,500 - PATRON

6 tickets | Half-page color ad in Journal | Listing in Invitation & Annual Gala Journal

• \$1.500 - FRIEND

2 tickets | Quarter-page color ad in Journal | Listing in Invitation & Annual Gala Journal

\$800 - DONOR

SIGNATURE

Reserved seating for one | Listing in Invitation & Annual Gala Journal

Please make checks payable to CITYarts, Inc and send it to the address below.

		TICKETS		
0	\$800 — ADMISSION FOR TWO (before I	May 14 th)		
0	\$500 — GENERAL ADMISSION (for one)) Number of t	icket(s) Total (\$)	
0	\$250 — SUPPORT AN ARTIST'S ADMI	SSION		
0	\$200 — JUNIOR SUPPORTER (for supporters age 35 and under) Number of ticket(s) Total (\$)			
	Unable to attend? GIVE SOMETHING \$ NOTE: For your name to be listed on the invitation, please inform us of your pledge by May 1st . (Your Gala Journal Ad Listing can be submitted separately by May 20th . Your name will be on a guest list at the event).			
ADDRE	ss	CITY	STATE	ZIP
TELEPH	HONE	EMAIL		
CREDIT	Γ CARD ○ AMEX ○ Mastercard ○ VIS.	A • Other	Checks are preferred, or visit of	our website for other transactions
CARD	NUMBER	EXP. DATE _	SEC. CODE	ZIP
NAME	ME ON CARD AMOUNT (\$)			

THANK YOU for your donation! Your generosity makes a difference.