

RANDALL'S ISLAND SPORTS FOUNDATION CHAMPIONS FOR CHILDREN GALA 2010

Celebrating new sports fields for active, healthy lifestyles!

Wednesday, November 17, 2010 | Espace, New York City

Table and Ticket Reservations

- | | |
|---|-----------------|
| <input type="checkbox"/> Commissioner Sponsor Table | \$25,000 |
| <ul style="list-style-type: none"> • Includes premium seating for 10 • Full page advertisement in journal • Listing in journal | |
| <input type="checkbox"/> Leadership Sponsor Table | \$15,000 |
| <ul style="list-style-type: none"> • Includes priority seating for 10 • Full page advertisement in journal • Listing in journal | |
| <input type="checkbox"/> Champion Sponsor Table | \$10,000 |
| <ul style="list-style-type: none"> • Includes preferred seating for 10 • Full page advertisement in journal • Listing in journal | |
| <input type="checkbox"/> Patron Ticket | \$2,500 |
| <ul style="list-style-type: none"> • Listing in journal | |
| <input type="checkbox"/> Friend Ticket | \$1,000 |
| <ul style="list-style-type: none"> • Listing in journal | |
| <input type="checkbox"/> Individual Ticket | \$750 |
| Number of seats: _____ | |
| <input type="checkbox"/> Contribution Only | |
| Though I cannot attend, I am pleased to make a contribution of \$_____ to the Randall's Island Sports Foundation. | |

Journal Advertising Deadline: October 20, 2010

- | | |
|--|-----------------|
| <input type="checkbox"/> Back Cover | \$12,000 |
| <input type="checkbox"/> Inside Front Cover | \$ 7,500 |
| <input type="checkbox"/> Inside Back Cover | \$ 6,000 |
| <input type="checkbox"/> Full page | \$ 2,000 |
| <input type="checkbox"/> Half page | \$ 1,000 |
| <input type="checkbox"/> Quarter page | \$500 |

For ad specifications, please contact the Benefit Office by phone: **212.829.0002** or email: **riscf@sharpthink.com**

LISTING (As it should appear in the printed material)

NAME

TITLE

COMPANY

ADDRESS

CITY

STATE

ZIP

E-MAIL

PHONE

Enclosed is my payment of \$_____. Please make checks payable to **Randall's Island Sports Foundation**. (Tax ID # 13-3787630)

Please charge my credit card: American Express Visa MasterCard

CARD NUMBER

EXPIRATION DATE

NAME (AS IT APPEARS ON CARD)

SIGNATURE OF CARDHOLDER

For online reservations: Please visit www.randallsisland.org. **Return to:** Gala Benefit Office, 415 Madison Ave., 24th Floor, New York, NY 10017

Contributions and journal ads are fully tax-deductible. The non tax-deductible portion of each ticket is \$185.

For further information: Please contact the RISF Benefit Office at **212.829.0002**, Fax: **212.829.0770** or email: **riscf@sharpthink.com**