



*Our Time Theatre Company's
Eighth Annual Benefit Gala*

HONORING CARLY SIMON

Monday, April 19, 2010
New York City

Skirball Center for the Performing Arts &
Rosenthal Pavilion at NYU

RESERVATIONS

- TABLE (\$25,000)** QUANTITY: _____
- ◆ 10 VIP TICKETS FOR PERFORMANCE
 - ◆ VIP DINNER TABLE FOR 10 GUESTS
 - ◆ PROMINENT SPONSOR LISTING ON INVITATION*
 - ◆ NAME/LOGO PRINTED ON LOBBY DISPLAYS
 - ◆ FULL PAGE AD AND SPECIAL THANKS PRINTED IN GALA PROGRAM**
 - ◆ VERBAL ACKNOWLEDGEMENT BY EVENING'S HOST

- PRIME DINNER TICKET (\$1,000)** QUANTITY: _____
- ◆ PREFERRED SEATING FOR PERFORMANCE & DINNER
 - ◆ SPECIAL THANKS LISTED IN GALA PROGRAM

- DINNER TICKET (\$300)** QUANTITY: _____
- ◆ RESERVED SEATING FOR PERFORMANCE & DINNER

- TABLE (\$10,000)** QUANTITY: _____
- ◆ 10 PRIME TICKETS FOR PERFORMANCE
 - ◆ PRIME DINNER TABLE FOR 10 GUESTS
 - ◆ HALF-PAGE AD AND SPECIAL THANKS PRINTED IN GALA PROGRAM

PROGRAM LISTINGS**

- LISTING (\$5,000)** QUANTITY: _____
- ◆ FULL PAGE AD & SPECIAL THANKS PRINTED IN GALA PROGRAM

- LISTING (\$2,500)** QUANTITY: _____
- ◆ HALF PAGE AD & SPECIAL THANKS PRINTED IN GALA PROGRAM

- LISTING (\$1,000)** QUANTITY: _____
- ◆ QUARTER PAGE AD & SPECIAL THANKS PRINTED IN GALA PROGRAM

PLEASE SELECT PAYMENT TYPE & RETURN WITH YOUR COMPLETED FORM:

PAY BY CREDIT CARD (INFO BELOW) \$ _____ PAY BY CHECK (PAYABLE TO OUR TIME THEATRE COMPANY) \$ _____

Name (as it is to appear in print):			
Contact Name (if different than above):			Amount: \$ _____
Credit Card Type (circle one) Visa MC AmEx Discover	Credit Card #		Exp. Date
Name as it appears on the card:		Signature:	
Address:			
City:	State:	Zip:	Email:
Fax:		Phone:	

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* Completed sponsorship form must be received by February 3rd, 2010.
** Artwork & payment must be received by March 26th, 2010.