

THE SHAKESPEARE THEATRE OF NEW JERSEY'S
ANNUAL GALA IN CELEBRATION OF

THE
BIG FIVE-OH!

OUR 50TH ANNIVERSARY SEASON

I (we) will attend the Gala

# _____ tickets	\$295	= \$ _____
# _____ tickets	\$500	= \$ _____
# _____ tickets	\$1,000	= \$ _____
Dinner Sponsor	\$20,000	= \$ _____
Cocktail Reception Sponsor	\$15,000	= \$ _____
Cabaret Sponsor	\$15,000	= \$ _____
Artists Sponsor	\$10,000	= \$ _____
Silent Auction Sponsor	\$5,000	= \$ _____
Gala Program Sponsor	\$2,500	= \$ _____
Tribute ad (details included)	\$ _____	= \$ _____

Total: \$ _____

I am unable to attend the Gala, but would like to make a contribution of
\$ _____.

(Contributions are tax-deductible to the fullest extent provided by law.)

Name _____
(as you would like it to be listed in the gala program)

Address _____

City _____ State _____ Zip _____

Phone (Home) _____ (Work) _____

Email _____

A check made payable to The Shakespeare Theatre of New Jersey is enclosed.

Please charge my: Visa MasterCard American Express Discover.

Account # _____ Exp. Date ____/____/____

*Please indicate on the reverse side of this card the names
of guests with whom you wish to be seated.*

Kindly respond by March 16th, 2012.