

YES, I would like to attend ASP's New Year's Eve Gala Benefit:

ASP GALA SPONSOR $\$5000. \times [\quad] =$ _____

Includes a table for 8, Sponsor credit in the Gala Program,
and preferred seating for *Twelfth Night*.
(tax deductible portion \$4000)

ASP GALA BENEFACTOR $\$1000. \times [\quad] =$ _____

Reserve 4 tickets by 12/1 to be an ASP Gala Benefactor.
Includes a half table (4 tickets) and a Benefactor credit
in the Gala Program.
(tax deductible portion \$500)

INDIVIDUAL TICKETS $\$250. \times [\quad] =$ _____

(tax deductible portion \$125)

SORRY, I'm unable to attend but enclose a donation in the amount of _____

Total Enclosed _____

(over)

If you are a Sponsor or a Benefactor, how would you like to be listed
in the evening's program?

If you'd like to be seated with friends at the dinner,
please provide their names below.

Please return this card with your check, or pay by MC/Visa.

Credit Card # _____ Exp. Date (MM/YY) ____ / ____

Name on Card _____

Signature _____

Please provide 3 digit security code, located on card signature panel _____

For more information, please call 617-661-9622 x704.