R.S.V.P. The 47th Annual Art Ball

Name		
Street Address		
City	State Zi	p
Phone	Email	
Number of Reservations/Raffle	Tickets	Amount
I'm unable to attend and would li to support art education and exh		\$
Museum Members \$150 per person for 40 and u \$175 per person for 41+	nder	\$ \$
Non-Members (all ages) \$195 per person		\$
Corporate Tables Table of 8: \$1,365 Table of 10: \$1,560		\$ \$
Number of Raffle Tickets (\$	30 each or two for \$50)	
		Total \$
Payment Reservations must be accompanied Art or credit card payment.		
□ Check Enclosed □ Visa □ Mas		
Card Number		3-digit Code
Expiration Date	Total from a	above \$
Name on Card		
Signature		

PLEASE INDICATE ANY SEATING PREFERENCES ON THE BACK OF THIS CARD >>

Seating Preferences

Please list the people with whom you wish to be seated, and list any dietary restrictions with the corresponding guest name in the space at the bottom. Tables seat eight to ten people.

Name
Name
Name
Name
Name
Dietary Restrictions

Please respond by Friday, August 19, 2016.

For more information, call 937.325.4673 or email smoa@springfieldart.net.

Your ArtBall reservation supports the Museum's art education and exhibition programs. You will receive a letter in early January 2017 indicating the portion of your reservation that may be deducted as a charitable gift on your income taxes.