

## SUPPORT OPPORTUNITIES

### HERO CIRCLE

- Contribution of \$50,000
- Two tables with premier seating for your party of twenty
- Prominent recognition at event and in all materials and hyperlink on event website
- Specialty cocktail names after family/ corporation

### LEADERSHIP CIRCLE

- Contribution of \$25,000
- Premium seating for your party of ten
- Recognition at the event and in all materials with a hyperlink on event website

### COMMITMENT CIRCLE

- Contribution of \$12,500
- Priority seating for your party of ten
- Recognition at the event and in all materials

### RECOVERY CIRCLE

- Contribution of \$5,000
- Preferred seating for your party of four
- Recognition at the event and in select materials

### SPIRIT OF COURAGE

- Contribution of \$3,000
- Preferred seating for two guests
- Recognition at the event and in select materials

### BENEFACTOR

- Contribution of \$1,250
- Seating for one guest
- Recognition at the event and in select materials

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## KINDLY REPLY BY FEBRUARY 20, 2020

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

### Yes, please accept my reservation:

- |   |                    |
|---|--------------------|
| <input type="checkbox"/> Hero Circle \$50,000               | Two Tables of Ten  |
| <input type="checkbox"/> Leadership Circle \$25,000         | Table of Ten       |
| <input type="checkbox"/> Commitment Circle \$12,500         | Table of Ten       |
| <input type="checkbox"/> Recovery Circle \$5,000            | Seating for Four   |
| <input type="checkbox"/> Spirit of Courage \$3,000          | Seating for Two    |
| <input type="checkbox"/> Benefactor \$1,250 ea.             | Seating for One    |
| <input type="checkbox"/> Individual Reservation \$1,000 ea. | # of Guests: _____ |
| <input type="checkbox"/> Junior Reservation \$300 ea.       | # of Guests: _____ |
- Guests under age 30*

No, I cannot attend but please accept my tax deductible contribution of \$ \_\_\_\_\_ in support of NEDA

## PAYMENT INFORMATION

- Check (payable to NEDA)  
 Credit Card

Name on Credit Card \_\_\_\_\_

Card Number \_\_\_\_\_ CVV \_\_\_\_\_

Exp. Date \_\_\_\_\_ Billing Zip \_\_\_\_\_

Signature \_\_\_\_\_

- I will be filling my table  
 I would like to donate \_\_\_\_\_ seats back to NEDA

NEDA is a registered 501 (c) 3 nonprofit organization. Tax ID # 13-3444882

The non-deductible portion of each reservation is \$275. If you choose not to attend the event, your contribution may be fully tax-deductible.

If paying by check, all payments must be received by June 1, 2020.

Mail to:

**NEDA**  
1500 Broadway  
Suite 1101  
New York, NY 10036

Need More Info? (212) 575-6200 or [Jgreen@myneda.org](mailto:Jgreen@myneda.org)