Please complete and return by: September 10, 2010

Yes, I would like to support the JCCCNC's Annual Event

___	$10,000 +	Presenting Sponsor (Reserved seating for 10 with preferred placement)
___	$5,000	Benefactor Sponsor (Reserved seating for 10 with preferred placement)
___	$2,500	Patron Sponsor (Reserved seating for 10 with preferred placement)
___	$1,500	Friends of the JCCCNC (Reserved seating for 4 with preferred placement)
___	$1,000	Community Partner (Reserved seating for 10)
___	$100	Reserved Seating tickets _____ Number of tickets (all tickets will be held at the door)
___	$25	Children ages 6-12 years old _____ Number of tickets (all tickets will be held at the door)
		Children 5 years old and younger are free

___ We are unable to attend but please accept our donation of $ _____

Please see reverse.

Total enclosed $ _____ *You can also register online at www.jcccnc.org*

Company Name _____

Contact Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Payment options: check ___ cash ___
Visa ___ MasterCard ___

Bill credit card $ _____

Credit card number _____

_____ Exp date _____

Name appearing on card _____