

33rd Annual Anchorage Wine & Food Festival Supporter Commitment Form



April 7, 2018 | 5:30pm | Hotel Captain Cook

Name/Company:				
	(As you would like d	isplayed in event materials, if	applicable)	
Mailing Address:				
City, State, Zip:				
UN	IDERWRITING AND	SPONSORSHIP PAC	CKAGES (please circle)	
Presenting	VIP Pre-Party	Survivorship	Table Gift	Keynote Speaker
\$25,000	\$15,000	\$15,000	\$12,500	\$12,500
Bid Board	Valet	Printing	Research	Prevention
\$12,500	\$10,000 *min. 2 year commitment	\$10,000	\$10,000	\$10,000
Silent Auction	Decor	Tableside Wine Service	Mission Boutique	No-Host Bar
\$7,500	\$7,500	\$7,500	\$7,500	\$7,500
Light-Up-The-Night	Champagne	Auction Paddle	Mystery Wine	Game of Chance
\$7,500	\$7,500	\$7,500	\$7,500	\$7,500
Game of Skill	Check-In	Check-Out	Table of 10	
\$7,500	\$7,500	\$7,500	\$5,000	
	PAYIV	IENT INFORMATIO	N	
) Enclosed is a check i	made out in the amount o	of: \$		
) I would like an invoi	ce for the full amount ser	nt to the mailing address	s listed above	
) I authorize the <u>Ame</u>	rican Cancer Society to ch	narge the credit card listo	ed below in the amount o	of: \$
Card Number:	Exp. Date:			
Name on Card (plea	ase print):			
Authorized Signatur	e:			
Billing Address (if di				
City, State, Zip:				
Full Name (of person comp	oleting this form) :			
Dautima Phana				
Dayume Phone:	0 0 1 1 504/010	Email:	T	