

The Japan Craze DINNER DANCE

Name (please print) _____

Address _____

City _____ State _____ Zip _____

Telephone _____ E-Mail _____

DINNER HOSTS *Table for 10*

Patron / \$25,000 Benefactor / \$10,000 Contributor / \$5,000 Supporter / \$3,500

INDIVIDUAL TICKETS

___ Patron at \$2,500 ___ Benefactor at \$1,000 ___ Contributor at \$500 ___ Supporter at \$350

FOR THE AFTER-DINNER PARTY _____ Tickets at \$100

Enclosed is my payment in the amount of \$_____

Please make check payable to the Newport Art Museum & Art Association.

Please charge a total of \$_____ to my: VISA MasterCard

Name as it appears on card _____

Card # _____ Exp. Date _____ Signature _____

I/We are unable to attend. Enclosed please find a tax-deductible contribution of \$_____

