

2017 Awards for Excellence in Community Service Luncheon

benefiting

The Dallas Historical Society

Thursday, November 9, 2017 – The Fairmont Hotel

TABLE HOST ORDER FORM

Name of Table Host/Corporation/Organization _____

Please list name as it should appear on printed materials

Contact Person _____

Address _____ City/State/Zip _____

Phone _____ Fax _____ Email _____

Table Donor Benefits

_____ **\$10,000** **Platinum History Maker**
VIP table for eight
Invitation to Patron Party and VIP Reception
Sponsor logo on event slide presentation
Recognition on DHS website and printed material
Fellows membership

_____ **\$1,000** **Bronze History Maker**
Table for eight
Sponsor logo on event slide presentation
Recognition in printed materials
Historian membership

_____ **\$5,000** **Gold History Maker**
Priority table for eight
Invitation to Patron Party and VIP Reception
Sponsor logo on event slide presentation
Recognition on DHS website and printed material
Fellows membership

Individual Reservations
_____ \$500 **Gold Historian Donor**
Priority no-host seating
Recognition in printed materials
Invitation to Patron Party and VIP Reception

_____ **\$2,500** **Silver History Maker**
Preferred table for eight
Invitation for two to Patron Party and VIP Reception
Sponsor logo on event slide presentation
Recognition on DHS website and printed material
Collector membership

_____ \$250 **Silver Historian Donor**
Preferred no-host seating
Recognition in program
Invitation to VIP Reception

_____ \$125 **Bronze Historian Donor**
Individual ticket

- _____ I will host a table
_____ Seat me at a table hosted by _____
_____ Seat me at a no-host table
_____ I am unable to attend but wish to make a donation in the amount of \$ _____
_____ Payment is in honor/memory of _____
_____ My company has a Matching Gift Program

Payment Information:

_____ Enclosed is my check in the amount of \$ _____ payable to **The Dallas Historical Society** or charge

VISA _____ **MASTERCARD** _____ **AMERICAN EXPRESS** _____ **DISCOVER** _____

NAME AS IT APPEARS ON CARD _____

CARD NUMBER _____ EXPIRATION _____

SIGNATURE OF CARDHOLDER _____

RETURN ORIGINAL WITH PAYMENT TO:

Dallas Historical Society - Awards for Excellence | P.O. Box 150038, Dallas, Texas 75315-0038
For further information, please call Nora Lenhart at 214-421-4500, ext. 106 or email: nora@dallashistory.org