



PARTNERS
for PARKS

Ticket Request Form

10th Anniversary Benefit Dinner

Thursday, March 1, 2007 5:30 pm

Myers Park Country Club

Donor Information

| | |
|----------------------|--|
| Name | |
| Organization | |
| Address | |
| City | |
| State | |
| ZIP Code | |
| Telephone (business) | |
| Fax | |
| E-Mail | |

Pledge Information

Please reserve the following tickets for us.

Individual Tickets ___ @ \$150 each Total _____

I am making this contribution in the form of:

___ cash ___ check ___ credit card (VISA or Mastercard only)

| | |
|----------------------|--|
| Credit card type | |
| Credit card number | |
| Expiration date | |
| Authorized signature | |

Please make checks payable to:

Partners for Parks
PO Box 681779
Charlotte, NC 28216

For more information contact:
704-336-8844
www.partnersforparks.org