



20th NCEA Seton Awards 2010

DONOR REGISTRATION FORM

MONDAY, OCTOBER 4, 2010

- ___ Yes, I am pleased to be a Chairman and contribute \$50,000. Please reserve my preferred table of 12, 12 tickets to the VIP Reception and contact me about my complimentary double-page ad in the Seton program. I also will receive 4 tickets to a special reception at the Vatican Embassy on Sunday, October 3 from 5-7 pm.
- ___ Yes, I am pleased to be a Co-Chairman and contribute \$25,000. Please reserve a preferred table of 12, send 12 tickets to the VIP Reception and contact me about my complimentary double-page ad in the Seton program. I also will receive 4 tickets to a special reception at the Vatican Embassy on Sunday, October 3 from 5-7 pm.
- ___ Yes, I am pleased to be a Vice-Chairman and contribute \$12,000. Please reserve my preferred table of 12, send 4 tickets to the VIP Reception and contact me about my complimentary full-page ad in the Seton program. I also will receive 2 tickets to a special reception at the Vatican Embassy on Sunday, October 3 from 5-7 pm.
- ___ Yes, I am pleased to be a Benefactor and contribute \$5,000. Please reserve my preferred table of 10, send 2 tickets to the VIP Reception and contact me about my complimentary half-page ad in the Seton program.
- ___ Yes, I am pleased to be a Patron and contribute \$3,000. Please reserve a table of 10 at the Gala, and recognize me in the Seton program.
- ___ Yes, I am pleased to be a Friend and contribute \$1,200. Please reserve 4 tickets for me and recognize me in the Seton program.
- ___ Yes, please reserve _____ ticket(s) for the Seton Awards Gala at \$350 each.
- ___ No, I regret I cannot be present for the Seton Awards, but I would like to support NCEA's work by contributing \$ _____ to the St. Elizabeth Ann Seton Student Scholars Program.

Name

Title

Affiliation

Address

City

State

Zip Code

Phone

email

For donations of \$1,200 and over, please indicate name as it should be listed in the Seton Awards program. Contributions are deductible to the extent allowable by law.

Enclosed is my check made payable to the National Catholic Educational Association or please charge my credit card account: \$ _____

Visa MasterCard American Express: Card Number _____

Expiration Date _____ CVC Security Code Number: _____ Signature _____

Questions, contact: Sharon Henry, toll free at 866.723.1781 or email shenry@toad.net.

NATIONAL CATHOLIC EDUCATIONAL ASSOCIATION

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