

“Vision Becomes Reality”



20th Anniversary

CAPTAINS OF INDUSTRY GALA

Benefits	Captain of Industry \$2,500	Developer of Industry \$1,000	Patron of Industry \$500
Table at event	One Table for 10	Four Seats	Two Seats
Company Logo on website	X	X	X
“Thank you” in PSBJ ad	X	X	
Company name in event materials and event program Tabor 100 newsletter	X		

2019 Partnership Packages

Thank you for becoming a partner of the 20th Annual Captains of Industry Gala. There are many levels to participate and we appreciate which ever you choose. Your gifts will support the Bradford Scholarship Endowment and/or Tabor 100 Operations.

I am interested in supporting Tabor 100 at the following level:

CAPTAIN OF INDUSTRY

DEVELOPER OF INDUSTRY

PATRON OF INDUSTRY

___ \$2,500

___ \$1,000

___ \$500

Company Name: _____

Contact Name and Title: _____

Address: _____

Phone Number: _____ Email: _____

Please utilize my donation for the following purpose:

___ Scholarships Only

___ Operations Only

___ Both Scholarships and Operations

All registrations, payments, and table guest lists are due to Tabor 100 by 9/15/19.

***No substitutions/changes to the table guest list will be accepted after 9/15/2019**

___ Please invoice me at the above address.

___ Check enclosed.

___ Registration and payment to be completed online via bankcard.

For Further information regarding the Gala and Event Partnership, please contact Gala@tabor100.org or 206-368-4042. Tabor 100 is a 501(C)3 Tax ID: 91-2013635

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ATTENDEE LIST

Please complete the list of attendees for your table

Table Name:

	First & Last Name	Complete Address	Phone Number	Credit Card Information (if participating in auction)	*Meal Selection (TBD)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

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Silent & Live Auction Donation

Donated Item or Services Description:

Please describe the donation in detail (e.g. quantity, brand name, product/service features, unique qualities, for man or woman, size, color, etc. If a service certificate please note: service location, expiration dates, number of people included, etc.)

Donor's Information:

Name: _____
Company _____
Address _____
City _____ State _____ ZIP _____
Phone (home): _____ (work): _____
FAX: _____ email: _____
Contact Name (if Different than Above): _____
Company _____ Title _____
Phone (home): _____ (work): _____
Donor's Estimated Value: \$ _____ Special Conditions or restrictions that may apply:

Donor's Signature: _____ Date: _____

Item/Certificate will be delivered to: _____

By: _____ Phone No. _____

Tabor Solicitor: _____ Phone No. _____

Please email this donation form to: gala@tabor100.org or Fax to: 425-881-6592

Thank you for your Support!

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