

Sizzling Hot Purk Saratoga Hat Luncheon

Name / Company (Please print as you wish to be listed in the program)		
Address		
City	State	Zip
Phone	Fax	E-mail
I/We would like to be an U (includes a table of ten, and acknowledge)) \$
I/We would like to be a Be (includes a table of ten)	enefactor at \$2,500	
 I/We would like to purchas \$1,000 Tiara \$50 	e ticket(s) at the fol O Fascinator 📮 \$250 Beret	
I/We cannot attend the Size but would like to make a tax	zling Hot Pink Saratoga Hat Lur «deductible contribution of \$	
Enclosed please find a chec	k for \$	
Please charge \$	_ to my:	
🗖 Amex 🗖 Visa 📮 A	Aastercard 📮 Discover	
Account Number		Exp. Date
Name on Card		Security Code
 Fc	prior to August 10 if you wish to be listed ir Please make checks payable to: The Breast Cancer Research Foundation ax the completed form to 718-659-3566. on, please call 718-659-2262 or email ja	
	ncer Research Foundation is a 501(c)(3) or s tax deductible, less \$50 per ticket for thos	