

NAME / COMPANY	(Please print as you wish to be listed)		
ADDRESS			
CITY / STATE / ZIP			
PHONE	FAX	E-MAIL	
O I/WE WOULD LIKE TO BE A	AN UNDERWRITER AT \$25,0	00 (or more) \$	
I/We would like to pur following level:	CHASE OR ASSEMBLE	_ table(s) of ten at the	
o \$10,000 Sponsor	o \$7,000 Patron	o \$5,000 Supporter	
O I/WE WOULD LIKE TO PUR	CHASE TICKET(S) AT	THE FOLLOWING LEVEL:	
o \$1,250 Platinum	o \$750 Gold	o \$550 Silver	
 In addition, I/we would for Researcher(s) I/We cannot attend, but contribution of \$ Enclosed is my check in the properties of the proper) AT \$ (MINIMUM UT ENCLOSE OUR FULLY TAX FOR \$	of \$550 per Researcher)	
O AMEX	O MASTERCARD O VISA	O DISCOVER	
ACCOUNT NUMBER		Expiration Date	
Name on Card		SECURITY CODE	

PLEASE RESPOND PRIOR TO JANUARY 24TH IF YOU WISH TO BE LISTED IN THE PROGRAM.

PLEASE MAKE CHECKS PAYABLE TO:

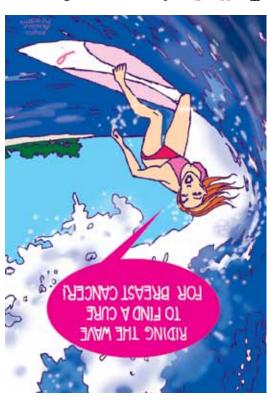
THE BREAST CANCER RESEARCH FOUNDATION

PLEASE MAIL THE COMPLETED FORM OR FAX TO 646-497-0890.

FOR ADDITIONAL INFORMATION, PLEASE CALL 646-497-2606 OR EMAIL TSALERNO@BCRFCURE.ORG.

The breast cancer research foundation is a 501(C)(3) organization. Your contribution is tax deductible, less \$85 per ticket for those who attend.

THE HOT PINK LUNCHEON AND SYMPOSIUM



My guest(s) will be	Please seat me with