

**Spring Gala and Auction  
Reservation Form**

**Gala Co-Chairs**  
Eric Blair-Joannou  
Fiona Cibani  
Olivia Douglas  
Abigail Scheuer

**Monday, February 27, 2017**  
Cocktails: 6:30PM  
Dinner: 7:30PM

at  
Conrad New York  
102 North End Ave  
New York City

I am delighted to support the work of The Bronx Museum of the Arts

**Please reserve the following table(s):**

\_\_\_\_\_ **\$50,000 Mosholu Parkway** (\$47,132 is tax deductible)

- First-tier seating for twelve guests at dinner
- Listing and logo recognition as a Lead Sponsor on printed materials
- Full-page tribute in the Gala Journal (back cover)
- Corporate or Foundation listing on Annual Donor Wall in Bronx Museum Lobby
- Limited Edition Print (tax-deductibility to be determined)

\_\_\_\_\_ **\$25,000 Fordham Road** (\$22,132 is tax deductible)

- Premium seating for twelve guests at dinner
- Prominent name and logo recognition in Gala Journal
- Full-page tribute in the Gala Journal
- Corporate or Foundation listing on Annual Donor Wall in Bronx Museum Lobby

\_\_\_\_\_ **\$15,000 Arthur Avenue** (\$12,610 is tax deductible)

- Table for ten guests at dinner
- Prominent name recognition in the Gala Journal
- Corporate or Foundation listing on Annual Donor Wall in Bronx Museum Lobby

\_\_\_\_\_ **\$7,500 Kingsbridge Road** (\$5,588 is tax deductible)

- Table for eight guests at dinner
- Name recognition in the Gala Journal
- Corporate or Foundation listing on Annual Donor Wall in Bronx Museum Lobby

**Please reserve the following ticket(s):**

\_\_\_\_\_ **\$1,500 Pelham Parkway** (\$1,261 is tax deductible)

- 1 Ticket with premium seating
- Name recognition in the Gala Journal

\_\_\_\_\_ **\$1,000 Bruckner Boulevard** (\$761 is tax deductible)

- 1 Ticket

I am unable to attend but wish to contribute \$ \_\_\_\_\_

Name (as it should appear in printed materials): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Payment Enclosed: \$ \_\_\_\_\_ (Please make check payable to: The Bronx Museum of the Arts)

Charge My:  Visa  MasterCard  American Express

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Signature: \_\_\_\_\_

**Please return form to:**  
The Bronx Museum of the Arts  
Spring Gala and Auction  
1040 Grand Concourse  
Bronx, NY 10456

For more information contact:  
Allison Grandy  
P: 718-681-6000 x 174  
E: Gala@Bronxmuseum.org