

THE CENTER FOR CURATORIAL STUDIES, BARD COLLEGE
AUDREY IRMAS AWARD FOR CURATORIAL EXCELLENCE GALA DINNER
HONORING LIA GANGITANO
MONDAY, APRIL 9, 2018
CAPITALE, 130 BOWERY, NEW YORK CITY

I/WE WILL ATTEND

I/WE CANNOT ATTEND

I PREFER NOT TO BE LISTED ON PRINTED MATERIALS

TABLES OF TEN

- | | | |
|---|----------|-----------------------------------|
| <input type="checkbox"/> LEGACY TABLE | \$30,000 | (TAX DEDUCTIBLE PORTION \$28,500) |
| <input type="checkbox"/> UNDERWRITER TABLE | \$20,000 | (TAX DEDUCTIBLE PORTION \$18,500) |
| <input type="checkbox"/> BENEFACTOR TABLE | \$10,000 | (TAX DEDUCTIBLE PORTION \$8,500) |
| <input type="checkbox"/> CURATOR AND ARTIST TABLE | \$5,000 | (TAX DEDUCTIBLE PORTION \$3,500) |

INDIVIDUAL TICKETS

- | | | |
|------------------------------------|---|-----------------|
| <input type="checkbox"/> PATRON | \$2,000 EACH (TAX DEDUCTIBLE PORTION \$1,850) | # _____ TICKETS |
| <input type="checkbox"/> ASSOCIATE | \$1,000 EACH (TAX DEDUCTIBLE PORTION \$850) | # _____ TICKETS |
| <input type="checkbox"/> SPONSOR | \$500 EACH (TAX DEDUCTIBLE PORTION \$350) | # _____ TICKETS |
| <input type="checkbox"/> FRIEND | \$300 EACH (TAX DEDUCTIBLE PORTION \$150) | # _____ TICKETS |

CHECK (*PAYABLE TO BARD COLLEGE*)

CREDIT CARD: VISA/MASTERCARD/AMERICAN EXPRESS

ACCOUNT NUMBER _____ EXP. DATE _____

SIGNATURE _____

PLEASE LIST MY NAME/OUR NAMES IN THE PRINTED MATERIAL AS (ONLY NAME WILL BE PRINTED):

NAME _____

ADDRESS _____

DAY TIME PHONE _____

EMAIL ADDRESS _____

FOR ADDITIONAL INFORMATION CALL RAMONA ROSENBERG AT CCS BARD 845-758-7574, FAX 845-758-2442, OR EMAIL: RROSENBERG@BARD.EDU

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