



LEGACY COMMUNITY HEALTH SERVICES
3RD ANNUAL CABARET FOR A CURE

FRIDAY, JANUARY 15, 2010
HILTON AMERICAS-HOUSTON
6:00 PM SILENT AUCTION
7:30 PM DINNER

2010 Co-CHAIRS – ANITA AND GERALD SMITH
2010 Co-CHAIR – PAUL-DAVID VAN ATTA
2010 HONORARY CHAIRS – DEBRA AND MARK GRIERSON
INDIVIDUAL HONOREES – TRINI MENDENHALL SOSA AND FRANK SOSA
CORPORATE HONOREE – SHELL OIL/JANI LOPEZ

_____ YES, I WOULD LIKE TO JOIN THE **HOST COMMITTEE!**

_____ PLEASE **RESERVE MY TABLE** FOR 10 AT THE FOLLOWING LEVEL:

- | | |
|--|---|
| <input type="checkbox"/> COTTON CLUB - \$100,000 (2 TABLES OF 12) | <input type="checkbox"/> STORK CLUB - \$15,000 |
| <input type="checkbox"/> MOULIN ROUGE - \$50,000 (TABLE OF 12) | <input type="checkbox"/> BLACK CAT CLUB - \$10,000 |
| <input type="checkbox"/> TROPICANA CLUB - \$25,000 | <input type="checkbox"/> BUTTERFLY CLUB - \$5,000 |

NAME:

ADDRESS:

CITY:

STATE:

ZIP:

PHONE 1:

PHONE 2:

FAX:

EMAIL:

MY CHECK IN THE AMOUNT OF \$ _____ IS ENCLOSED.

-OR-

PLEASE CHARGE \$ _____ TO MY **VISA / MASTERCARD / AMERICAN EXPRESS.**

NAME ON CARD:

SIGNATURE:

CARD NUMBER:

CITY:

STATE:

ZIP:

BILLING ADDRESS (IF DIFFERENT THAN ABOVE):

CITY:

STATE:

ZIP:

PLEASE **RECOGNIZE IN PRINTED MATERIALS** AS _____

MY CONTRIBUTION IS IN **MEMORY / HONOR OF** (OPTIONAL) _____

LEGACY COMMUNITY HEALTH SERVICES
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