

# ACE 2012 DONATIONS

( ) I would like to donate the following gift(s) for the auction. Value of gift: \$ \_\_\_\_\_

Description: \_\_\_\_\_

**(\$5.00-\$249.00 - Items are placed on the Silent Auction; \$250.00 or higher - Items are placed on the Oral Auction; [exceptions determined by Alumni Office Staff only] and ALL ITEMS SHOULD BE NEW.)**

( ) I will deliver my gift to the school. Date of delivery: \_\_\_\_\_

( ) Please pick up my gift. Date pickup requested: \_\_\_\_\_

( ) I am unable to donate a gift, but enclosed is my donation of \$ \_\_\_\_\_ to help in financing the Auction for Christian Education.

( ) Choose From Four Different Raffle Tickets Enclosed:

- 1) 2012 Ford Fusion SE 4 DR Raffle Prize - Buy one raffle ticket for \$100 or get all three-raffle tickets for \$200!
- 2) One \$5,000.00 Cash Raffle Prize - Buy one raffle ticket for \$25 or get all three-raffle tickets for \$50!
- 3) One \$2,500.00 Cash Raffle Prize - Buy one raffle ticket for \$15.00 or get all three raffle tickets for \$30!
- 4) Three \$1,000.00 Cash Prize Drawings - Buy one raffle ticket for \$10 or get all three-raffle tickets for \$20!

( ) I am interested in placing an ad in the Auction Catalog. (Please e-mail logos/ads to: alumni@tmp-m.org.)

\_\_\_\_\_ Business card size for \$25 (Please enclose a business card.)

\_\_\_\_\_ Half page (4.5" x 3.75") for \$50

\_\_\_\_\_ Full page (4.5" x 7.5") for \$100

( ) I am unable to donate, but would be willing to volunteer my time to help at the auction.

**DONATION TOTAL ENCLOSED: \$ \_\_\_\_\_**

NAME \_\_\_\_\_ CLASS YEAR \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

***DONATION DEADLINE TO BE INCLUDED IN CATALOG – MARCH 1, 2012***

## ACE 2012 TICKET RESERVATIONS

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

\_\_\_\_\_ Regular Tickets at \$50 per person

\_\_\_\_\_ VIP Tickets at \$100 per person

\_\_\_\_\_ Auctioneer Tickets at \$500 per couple

**TICKET TOTAL ENCLOSED: \$ \_\_\_\_\_ (Please remit payment before 3-30-2012)**

I would like to be seated with the following individuals listed below (Tables of 8 or 16 available):

Name \_\_\_\_\_ Address \_\_\_\_\_ Payment Enclosed \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***Make your reservations early as space is limited! Payment must accompany this form.***

**You may include all of the above on one check.**

**Please make check(s) payable to the Alumni Assn. of TMP-Marian**

**1701 Hall, Hays, KS 67601 - (785) 625-9434**