



Gift of Life Gala Guest Reservation & Sponsorship Form

Please print this form, provide the requested information and mail or fax per the instructions below. [To view sponsorship opportunities, please click on the link to the left that says Become A Sponsor.](#)

Yes! I would like to sponsor the Gala at the _____ Sponsorship Level. Please see my guest list below. My check is enclosed in the amount of \$_____.

Yes! I will attend. I would like _____ guest reservations. Please see my guest list below. My check is enclosed in the amount of \$_____.

Sorry! I cannot attend but please accept my fully tax deductible donation in the amount of \$_____.

My Name _____ **Company Name (if applicable)** _____
(As you would like it to appear in print)

Address _____ **City** _____ **Zip** _____

My Email Address: _____ **Phone ()** _____

GUEST LIST

Please indicate Mr., Mrs., or Ms for each guest.

1.) Name _____ 2.) Name _____

3.) Name _____ 4.) Name _____

5.) Name _____ 6.) Name _____

7.) Name _____ 8.) Name _____

9.) Name _____ 10.) Name _____

Payment Method Check VISA MasterCard AMEX Discover
(Please check one payment method)

Credit Card Number: _____ **Exp Date** _____ **Security Code** _____ *

Please print legibly

Your mailing address and phone number must be provided in order for your credit card to be processed. If you prefer, you may call the Foundation and provide credit card information over the phone.

* The security code can be found on the back of your credit card – last group of digits on the right

Mad Hatter's Ball ■ Saturday, March 15th ■ 6:30 p.m. to 11:00 p.m. ■ Sandpearl Resort ■ Clearwater Beach

Tickets are \$200 per person. For IRS purposes, guests may deduct gifts over \$95 per person. Please make checks payable to Florida Blood Services Foundation.

Please mail or fax this form and payment to:

Florida Blood Services Foundation
10100 Dr. Martin Luther King Jr. St. N
St. Petersburg, FL 33716

FAX: 727-568-2230 ■ PHONE: 727-568-2231

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE 1-800-435-7532 WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL OR RECOMMENDATION BY THE STATE.