

# RISING STARS YOUTH FOUNDATION 9<sup>TH</sup> ANNUAL TESTIMONIAL DINNER HONORING

MAN OF THE YEAR

MR. TED VIRTUE, CEO AT MIDOCEAN PARTNERS

AND

HUMANITARIAN OF THE YEAR

MR. ALLAN HOUSTON, ASS'T. GEN.MGR. NY KNICKS

MAY 21<sup>ST</sup> 2012      THE NEW YORK  
6:00 - 9:30<sup>PM</sup>      ATHLETIC CLUB

[RISINGSTARSINC.ORG](http://RISINGSTARSINC.ORG)

[NYAC.ORG](http://NYAC.ORG)

## THE TABLE IS SET

COCKTAILS 6:00 - 7:00<sup>PM</sup> - DINNER 7:00<sup>PM</sup>

RSVP BY MAY 7<sup>TH</sup> 2012

MASTERS OF CEREMONIES

MR. JAY WILLIAMS AND MR. TOM BRENNAN



PROFESSIONAL BUSINESS ATTIRE - JACKET REQUIRED - NO JEANS OR SNEAKERS

180 CENTRAL PARK SOUTH, NEW YORK CITY, NY 10019-1562



# RISING STARS ANNUAL FUND RAISING RESERVATION FORM

Please use this form to make your reservation to attend Rising Stars Annual Fund Raising Dinner or send your donation. Rising Stars, Inc. is a 501(c)(3) federally tax-exempt organization. Grantors and contributors may rely on our IRS classification and deduct contributions as provided in section 170 of the Internal Revenue Code.

## PLEASE INDICATE YOUR CHOICE

## CONTACT AND MAILING INFORMATION

<p><b>— VIP Table of 10 - \$10,000.00</b> Private reception and signing with Jay Williams and other celebrities, added gift</p> <p><b>— All Star Table of 10 - \$5,000.00</b> Includes general cocktail reception, assigned seating, gift</p> <p><b>— Single Seating Tickets - \$500.00</b> Includes general cocktail reception, gift</p> <p><b>— Donation</b> _____</p>	<p style="text-align: right;"><b>R.S.V.P by May 7, 2012</b></p> <p><b>Contact:</b></p> <p><b>Dan Gimpel:</b> 917-202-2533 dan.gimpel@risingstarsinc.org</p> <p><b>Althea Williams:</b> 908-397-8405 aabwilliams@gmail.com</p> <p><b>Fax:</b> 516-889-0067</p> <p style="text-align: center;"><b>Please return this form and your check or credit card information to:</b> Rising Stars, Inc. P.O. Box 1596 Flushing, NY 11354</p>
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Amount of Reservation: \$ \_\_\_\_\_

Payment Method

Name: \_\_\_\_\_

Check     Visa     Master Card

Company: \_\_\_\_\_

Amex     Discover     Diners Club

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

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

\_\_\_\_\_

Name of Card Holder: \_\_\_\_\_

\_\_\_\_\_

Expiration Date: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Guest Names (PLEASE PRINT)

1. \_\_\_\_\_ 6. \_\_\_\_\_

2. \_\_\_\_\_ 7. \_\_\_\_\_

3. \_\_\_\_\_ 8. \_\_\_\_\_

4. \_\_\_\_\_ 9. \_\_\_\_\_

5. \_\_\_\_\_ 10. \_\_\_\_\_