

Sponsor Commitment Form

NDDS GALA for Smiles

August 28, 2010

- Platinum Sponsor for \$10,000**
(includes seating for 10)
- Diamond Sponsor for \$5,000**
(includes seating for 8)
- Gold Sponsor for \$3,000**
(includes seating for 6)
- Silver Sponsor for \$1500**
(includes seating for 4)
- Bronze Sponsor for \$600**
(includes seating for 2)
- Patron Sponsor for \$250**
(couple)
- Patron Sponsor for \$150**
(individual)

Company _____

Name: _____

Address: _____

Phone: _____ Fax: _____

Please Bill me

Pay by check (*Please make checks payable to the Greater Atlanta Dental Foundation*)

Pay by **Visa** **Mastercard**

Name: _____

Credit Card #: _____

Expr. _____ Signature: _____

Invitations to be mailed by July 16.

Please return to:
NORTHERN DISTRICT DENTAL SOCIETY
4850 Golden Parkway, Suite B-417
Buford, GA 30518
770-271-8743 phone 770-271-0634 fax