

NYC Parks Mounted Auxiliary Unit, Inc.

# 2007 Annual Gala

Monday, October 1, 2007

6:00 pm to 9:00 pm

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Circle one:            visa            mc            amex

Name as it appears on the credit card \_\_\_\_\_

Billing address if different from above \_\_\_\_\_

Card number \_\_\_\_\_ Expiration date \_\_\_\_\_

Signature \_\_\_\_\_ Security code \_\_\_\_\_

Please reserve \_\_\_\_\_ tickets for me at \$100 each.

Please reserve \_\_\_\_\_ Benefactor tickets for me at \$250 each.

*Tickets will not be mailed. They will be held in your name at the door.*

I am unable to attend but will contribute \$ \_\_\_\_\_ to support the  
important activities of the Mounted Auxiliary Unit.

Benefactors will be acknowledged in the Gala program.

Please list your name as you wish it to appear.

\_\_\_\_\_  
Enclosed is my check in the amount of \$\_\_\_\_\_.

*Please make checks payable to NYC Parks Mounted Auxiliary Unit, Inc.*

Above is my credit card authorization for \$\_\_\_\_\_.

Please mail to:  
Margot Jacqz  
c/o Roz Goldfarb Associates  
207 West 25th Street  
4th Floor  
New York NY 10001

*Contributions are tax-deductible as provided by law;  
the non-deductible portion of each ticket is \$35. For further information,  
please call the Mounted Auxiliary Unit at 212.769.7769 .*

City of New York  
Parks & Recreation

