Please select your sponsorship level and complete the following information:

**\_\_\_ Royal Flush ♣ Presenting Sponsor ♣ $50,000 ($48,820 tax deductible)**

Exclusive presenting sponsor naming rights for the event; Two VIP tables of 10 with premier seating in Presenting Sponsor section; Name and logo on step and repeat; VIP parking for 10 cars; Celebrity Poker Tournament buy-in for 20 people; Meet and greet with evening's entertainer; Option for on-stage check presentation; Full-page ad in program; Presenting Sponsorship acknowledgement by hosts; Name and logo on all printed materials and media outreach

**\_\_\_ Straight Flush ♠ Corporate Sponsor ♠ $25,000 ($24,410 tax deductible)**

Exclusive naming rights for a premier area of choice: silent auction or poker room; 1 VIP table of 10 - premier seating in Corporate Sponsor section; Celebrity Poker Tournament buy-in for 10 people; VIP parking for 5 cars; Full-page ad in program; Corporate Sponsor acknowledgement by hosts; Name and logo on all printed materials and outreach

**\_\_\_ Four of a Kind ♥ Supporting Sponsor ♥ $12,000 ($11,410 tax deductible)**

Company logo prominently displayed at event; 1VIP table of 10 - seating in Supporting Sponsor section; Celebrity Poker Tournament buy-in for 10 people; Full-page ad in program; Supporting Sponsor acknowledgement by hosts; Name and logo on all printed materials and media outreach

**\_\_\_ FuII House ♦ Table Sponsor ♦ $6,000 ($5,410 tax deductible)**

Reserved table of 10; Celebrity Poker Tournament buy-in for 10 people; Half-page ad in program; Name and logo on all printed materials and media outreach

**\_\_\_ Three-of-a-Kind ♣ CDMD Friend ♣ $3,000 ($2,410 tax deductible)**

Reserved table of 10

**\_\_\_ Individual Poker VIP ♠ $500 ($441 tax deductible)**

Event ticket and Celebrity Poker Tournament buy-in for one person

**\_\_\_ Individual Ticket ♠ $200 ($141 tax deductible)**

Event attendance only. Does not include poker buy-in.

**TOTAL AMOUNT $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Contact Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PAYMENT**

**□ Check □ Visa □ MasterCard □ Amex □ Discover**

***If paying by check, please make payable to: The UCLA Foundation - CDMD***

Card# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Exp. Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name on Card \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CVV (3-4 digit code) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***To charge by phone or for more information call: 310-779-7422 or 310-801-1180***

**PLEASE MAIL COMPLETED FORM TO:**

Amy Martin - Center for Duchenne Muscular Dystrophy at UCLA

277 Biomedical Sciences Research Building • 615 Charles E. Young Dr. S. • Los Angeles • CA • 90095

Nonprofit Tax I.D. #95-2250801