

THE 36TH ANNUAL VIRTUAL GREAT SPORTS LEGENDS DINNER

SPONSORSHIPS AND TICKETS

LEGENDS CIRCLE - \$100,000 EACH. Reserve ____ sponsorship(s).
Virtual event entry for ten guests.

CHAMPIONS CIRCLE - \$50,000 EACH. Reserve ____ sponsorship(s).
Virtual event entry for ten guests.

EXECUTIVE COMMITTEE - \$25,000 EACH. Reserve ____ sponsorship(s).
Virtual event entry for ten guests.

PATRON COMMITTEE - \$15,000 EACH. Reserve ____ sponsorship(s).
Virtual event entry for ten guests.

DINNER COMMITTEE - \$10,000 EACH. Reserve ____ sponsorship(s).
Virtual event entry for ten guests.

PATRON TICKET - \$1,500 EACH. Reserve ____ virtual entry(s).

DINNER TICKET - \$1,000 EACH. Reserve ____ virtual entry(s).

I would like to make a tax-deductible donation to support The Buoniconti Fund and its mission to cure paralysis in the amount of \$_____.



Presented by
Tudor Group and The Mack Family

Enter your name and/or company as you wish it to appear in the Dinner Program.

NAME _____

COMPANY (if applicable) _____

ADDRESS _____

CITY/STATE/ZIP _____

BUSINESS or HOME PHONE () _____ CELL () _____

E-MAIL _____

CREDIT CARD: American Express MasterCard Visa Discover Corporate Personal

AMOUNT TO CHARGE: \$ _____ EXPIRATION DATE _____ / _____ CW _____

CARD No. _____

SIGNATURE _____

For reservations and inquiries, contact **Jackie Manzano** at **(305) 243-4656** or **jmanzano@miami.edu**

REGISTER ONLINE AT WWW.BIDPAL.NET/GSLD2021

Please make checks payable to The Buoniconti Fund. Please list your guests on reverse side.

The Buoniconti Fund's federal tax identification #**65-0244316**. Your donation is 100% tax deductible.

Return form to Jackie Manzano • The Buoniconti Fund • 1095 NW 14th Terrace • Miami, FL 33136



#SportsLegendsDinner

#BuonicontiFund

GUEST INFORMATION (Please complete all fields for each guest)

GUEST 1: NAME _____ CELL PHONE () _____

FULL ADDRESS _____

EMAIL _____

GUEST 2: NAME _____ CELL PHONE () _____

FULL ADDRESS _____

EMAIL _____

GUEST 3: NAME _____ CELL PHONE () _____

FULL ADDRESS _____

EMAIL _____

GUEST 4: NAME _____ CELL PHONE () _____

FULL ADDRESS _____

EMAIL _____

GUEST 5: NAME _____ CELL PHONE () _____

FULL ADDRESS _____

EMAIL _____

GUEST 6: NAME _____ CELL PHONE () _____

FULL ADDRESS _____

EMAIL _____

GUEST 7: NAME _____ CELL PHONE () _____

FULL ADDRESS _____

EMAIL _____

GUEST 8: NAME _____ CELL PHONE () _____

FULL ADDRESS _____

EMAIL _____

GUEST 9: NAME _____ CELL PHONE () _____

FULL ADDRESS _____

EMAIL _____

GUEST 10: NAME _____ CELL PHONE () _____

FULL ADDRESS _____

EMAIL _____