

**2018 MACCW SCHOLARSHIP LUNCHEON COMMITMENT FORM**

Saturday, February 24, 2018 at 11:30 a.m.

Embassy Suites Hotel, 1100 SE 17<sup>th</sup> Street, Fort Lauderdale, FL 33316

**DONOR INFORMATION** (Please Print)

Name \_\_\_\_\_ Company Name \_\_\_\_\_  
Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

**UNDERWRITING OPPORTUNITIES**

*Enclosed please find my tax-deductible donation of:*

- Platinum Giving Circle \$1000.00 +       Gold Giving Circle \$750.00
- Silver Giving Circle \$500.00               Bronze Giving Circle \$250.00
- Other: \$ \_\_\_\_\_

**TABLE SPONSORSHIP OPPORTUNITIES**

- Platinum Level (Table of 10): \$1,000.00       Gold Level (Table of 10): \$750.00
- Silver Level (Table of 10): \$500.00               Individual Ticket \$50 x \_\_\_\_\_ qty. = \$ \_\_\_\_\_

**AUCTION DONATION(S)**

I am able to donate the following item(s) for the Auction:

Item: \_\_\_\_\_

Item Description: \_\_\_\_\_

Value: \$ \_\_\_\_\_

**MEMORIAL DONATION(S)**

Memorial donations are recognized in our luncheon program (print deadline 02/14/18).

Total Donation Enclosed: \$ \_\_\_\_\_

Please list the name(s) of the deceased below, as you wish them to be printed in the program:

(1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_

**PAYMENT**

**Check Enclosed.** *Please make checks payable to: MACCW Scholarship Fund.*

Credit Card payment information below:

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Security Code \_\_\_\_\_

Name on Credit Card \_\_\_\_\_ Signature \_\_\_\_\_

Please return completed form to:

Mary Weber, MACCW Scholarship, 1700 NE 105 Street #419, Miami Shores, FL 33138.

*MACCW is a supporting organization of the Archdiocese of Miami, a registered nonprofit in the State of Florida and tax exempt under section 501(C)(3) of the IRS code. All donations are tax-deductible.*

Miami Archdiocesan Council of Catholic Women Scholarship Fund  
[www.MACCW.org](http://www.MACCW.org)    maccwscholarshipfund@gmail.com