



Diamonds Are Forever



2018 James Bond Gala
Saturday, September 8, 2018
Table Sponsor Form

Please print your company/name exactly how you would like to be listed on Gala marketing materials:

Company/Name:		Email:	
Address:	City:	State:	Zip:
Contact/Authorized By:		Title:	
Phone:	Fax:		

Please check one:

- Half Table: 5 tickets, \$575.00
- Half Gem Table: 6 tickets, \$690.00
- Full Table: 10 tickets, \$1,150.00
- Gem Table: 12 tickets, \$1,400.00 *(elite seating)*

Please list attendees at your table:

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____
- 7) _____
- 8) _____
- 9) _____
- 10) _____
- 11) _____
- 12) _____

Please submit finalized table information to a CFSNM team member by August 3, 2018.

Table Sponsorship Commitment:

Table Level: \$ _____

*Table Name: _____

**Some table sponsors choose to not advertise their company/name and instead theme their table name with the James Bond theme. Clarify this on "Table Name" listed above.*

Is there a company form CFSNM needs to sign to use your company/name? Yes No

Are there any restrictions to using your company/name? Yes No

Please list restrictions, if any: _____

Payment Information:

- I want to make a credit card payment by filling out the attached credit card form.
- I want to make a credit card payment by calling the CFSNM office to pay over the phone.
- I want to make a check payment:
 - *Checks should be addressed to **The Community Foundation of Southern New Mexico**
 - I will mail in my check payment to the CFSNM office.
 - I will hand deliver my check payment to the CFSNM office.
- I want an invoice sent to the address listed above.

I, _____ (*print name*), have authorized the above agreement to be a 2018 Gala table sponsor for the Community Foundation of Southern New Mexico (CFSNM). I understand the obligation I have as a table sponsor to provide the needed information to CFSNM so their team can fulfill their obligation to my business per this agreement.

Signature: X _____ Date: _____

CFSNM Witness Signature: X _____ Date: _____

Thank you for completing this form and returning it to: Alexia Goodwin, Special Events Coordinator

*Drop off or mail to: C/O Community Foundation of Southern New Mexico
2600 El Paseo Road, Las Cruces, NM 88001*

Scan and email to: alexia@cfsnm.org For questions call: 575-521-4794

The Community Foundation of Southern New Mexico is a 501 (c)(3) non-profit organization
tax identification number is #85-0455682

Your support allows your Community Foundation the opportunity to continue making a meaningful impact in the lives of those living in southern New Mexico.