THE CRYSTAL CHARITY BALL FASHION SHOW

ADAM LIPPES | FRIDAY, SEPTEMBER 8, 2023

COMPLETE PAYMENT MUST BE INCLUDED WITH THIS CONTRACT & RESERVATION FORM TO CONFIRM & HOLD RESERVATION

Miss/Ms. Mrs./Dr.		Spouse Mr./Dr		
Address		City/State Zip		
Phone		E-mail		
□ I wish to be listed in the program as		□ I do not wish to be listed in the program □ Dec	cline all benefits	
DIAMOND TABLE	\$50,000	DIAMOND TICKET	\$5,000	
 I would like to purchase a \$50,000 table, which include Highest Priority Seating for ten at Fashion Show Patron Dinner invitations for five couples* Patron Cocktail Party invitations for five couples* Private transportation to and from the Fashion Show for one location OR VIP parking for you and your guests Fashion Show and Patron Dinner Private shopping event at Neiman Marcus with a virtual consultation with Adam Lippes Most Prominent Program Recognition 	rom at the	 I would like to purchase a \$5,000 ticket, which include Highest Priority Seating for one at Fashion Show Patron Dinner invitation for one couple* Patron Cocktail Party invitation for one couple* Prominent Program Recognition 	s: ber of Tickets	
PLATINUM TABLE	\$25,000	PLATINUM TICKET	\$2,500	
 I would like to purchase a \$25,000 table, which includes: Priority Seating for ten at Fashion Show Patron Dinner invitations for five couples* Patron Cocktail Party invitations for five couples* Prominent Program Recognition 		 I would like to purchase a \$2,500 ticket, which includes: Priority Seating for one at Fashion Show Patron Dinner invitation for one couple* Patron Cocktail Party invitation for one couple* Program Recognition 		
		Platinum Ticket seating is limitedNum	nber of Tickets	
GOLD TABLE	\$10,000	GOLD TICKET	\$1,000	
 I would like to purchase a \$10,000 table, which includes: Seating for ten at Fashion Show Patron Dinner invitation for one couple* Patron Cocktail Party invitation for one couple* Prominent Program Recognition 		 I would like to purchase a \$1,000 ticket, which includes: Seating for one at Fashion Show Patron Cocktail Party invitation for one couple* Program Recognition Gold Ticket seating is limited 		
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PLEASE PROVIDE ATTENDEES NAMES AND ADDRESSES ON REVERSE SIDE *INVITATIONS TO PARTIES ARE NOT TRANSFERABLE

METHOD OF PAYMENT							
\Box I am unable to attend but would like to make a donation in the amount of \$	in honor of						
□ Enclosed is my check in the amount of \$	_ Please make checks payable to: The Crystal Charity Ball						
Charge my credit card Account #	In the amount of \$						
Name on Account Exp. Date	Signature						

Mail to: Janie Condon and Alison Malone, Fashion Show Reservations Chairmen The Crystal Charity Ball, 3838 Oak Lawn Avenue, Suite L150, Dallas, Texas 75219 Phone: 214.526.5868 Information E-mail: cethel@crystalcharityball.org The non-deductible portion of each ticket is \$50.00

SEATING AT ALL LEVELS IS LIMITED

FASHION SHOW ATTENDEE LIST / INVITATION LIST

PLEASE FILL OUT THE FORM INCLUDING PAYMENT INFORMATION TO ENSURE THAT YOUR GUESTS RECEIVE INVITATIONS.

1	Ms./Mrs. ATTENDEE Dr./Mr	Ms./Mrs. SPOLISE Dr./Mr		
1	Address	-		
	Check to The Crystal Charity Ball enclosed	r		
	□ Charge my □ MC or □ Visa Account #			
2	Ms./Mrs. ATTENDEE Dr./Mr.	Ms./Mrs. SPOUSE Dr./Mr		
-	Address			
	Check to The Crystal Charity Ball enclosed			
	□ Charge my □ MC or □ Visa Account #	 Amount \$	Exp. Date	
	Ms./Mrs.	Ms./Mrs.		
3	ATTENDEE Dr./Mr	SPOUSE Dr./Mr		
	Address			
	□ Check to The Crystal Charity Ball enclosed			
	□ Charge my □ MC or □ Visa Account #	Amount \$	Exp. Date	
4	Ms./Mrs. ATTENDEE Dr./Mr.	Ms./Mrs. SPOUSE Dr./Mr.		
	Address			
	□ Check to The Crystal Charity Ball enclosed			
	□ Charge my □ MC or □ Visa Account #			
_	ATTENDER Ms./Mrs.	Ms./Mrs.		
Э	ATTENDEE Dr./Mr Address			
	Check to The Crystal Charity Ball enclosed	Zip		
	□ Charge my □ MC or □ Visa Account #			
		/ mooni	Exp. Date	
6	Ms./Mrs. ATTENDEE Dr./Mr	Ms./Mrs. SPOUSE Dr /Mr		
	Address			
	Check to The Crystal Charity Ball enclosed			
	□ Charge my □ MC or □ Visa Account #	Amount \$	Exp. Date	
_	ATTENDER Ms./Mrs.	Ms./Mrs.		
1	ATTENDEE Dr./Mr.			
	Address Check to The Crystal Charity Ball enclosed	Zip	Phone	
	□ Charge my □ MC or □ Visa Account #		Exp. Date	
8	Ms./Mrs. ATTENDEE Dr./Mr.	-		
	Address			
	□ Check to The Crystal Charity Ball enclosed			
	□ Charge my □ MC or □ Visa Account #	Amount \$	Exp. Date	
9	Ms./Mrs. ATTENDEE Dr./Mr.	 Ms./Mrs. SPOUSE Dr./Mr.		
	Address			
	Check to The Crystal Charity Ball enclosed			
	□ Charge my □ MC or □ Visa Account #	Amount \$	Exp. Date	
	Ms./Mrs.	Ms./Mrs.		
10	ATTENDEE Dr./Mr	-	Phone	
	Address Check to The Crystal Charity Ball enclosed			
	□ Charge my □ MC or □ Visa Account #	Amount \$		
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Please return this list with your Reservation form to: The Crystal Charity Ball, 3838 Oak Lawn Avenue, Suite L150, Dallas, Texas 75219 For questions, please call 214.526.5868 or E-mail cethel@crystalcharityball.org