

# Reid & Fiorentino Events - TICKET PACKAGE REQUEST FORM



## ACORDIS CALL OF THE GAME DINNER

PRESENTED BY SEMINOLE HARD ROCK HOTEL & CASINO

– Fri., March 10<sup>th</sup> 2017 Hosted by Seminole Hard Rock Hotel & Casino

## CELEBRITY GOLF CLASSIC

– Mon., March 20<sup>th</sup> 2017 at Turnberry Isle Miami

Benefiting: Lauren's Kids & Dade Schools Athletic Foundation

### CONTACT INFORMATION:

First/Last Name:			
Company Name:		Title:	
Address:		City:	State: Zip Code:
Phone:	Fax:	Email:	

### "ACORDIS CALL OF THE GAME DINNER" (Fri., March 10<sup>th</sup> 2017) Hosted by Seminole Hard Rock Hotel & Casino)

Gold Table of ten (10)	Ten (10) seats at the dinner with one (1) celebrity and guest at table "or" table of twelve (12); preferred seating; name/logo listed in program book.	\$ 5,000		\$
Silver Table of ten (10)	Ten (10) seats at the Dinner	\$ 2,750		\$
Individual Seat(s)	One (1) seat at a table to the Dinner	\$ 275		\$

\*UPON RECEIPT OF FORM, WE WILL SEND YOU AN EMAIL CONFIRMATION THAT YOU CAN FAX BACK WITH THE NAMES OF YOUR DINNER GUESTS

### "CELEBRITY GOLF CLASSIC" (Monday, March 20<sup>th</sup> 2017 at Turnberry Isle Miami)

OPTIONS	DESCRIPTION	PRICE	QUANTITY	SUBTOTAL
Golf Foursome	Four (4) players with one (1) celebrity player	\$ 3,000		\$
Individual Golfer	One (1) player to be paired with 3 other players and one (1) celebrity player	\$ 800		\$

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<b>MVP Golf &amp; Dinner Package</b>	<b>One (1) Golf Foursome &amp; One (1) Silver Table</b>	<b>\$5,000</b>		<b>\$</b>
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### AD & Tee Sign

Full Page Program Ad	Full Page ad in the Call of the Game Dinner Official Program (ad specs will be sent upon receipt of form)	\$ 500		\$
Half Page Program Ad	Half Page ad in the Call of the Game Dinner Official Program (ad specs will be sent upon receipt of form)	\$ 250		\$
Tee Sign	Company Name or Logo on one (1) dedicated tee sign on golf course at Celebrity Golf Classic	\$ 300		\$

No, I will not be able to attend. Please accept my donation to the Reid & Fiorentino Events: \$

GRAND TOTAL: \$ \_\_\_\_\_

### PAYMENT INFORMATION:

Enclosed is my check payable to Lauren's Kids

Charge my Credit Card (circle one): AMEX          VISA          MC

Credit Card No.	Expiration Date:		
Signature	Security Code:		
Billing Address:	City:	State:	Zip Code:

Thank you for your support

Please mail or fax this form to:

**Agency 21 Consulting | Attn: Maribel Chaluja | 1428 Brickell Ave., Suite 303 | Miami, FL 33131 | Maribel@agency21consulting.com**

**Fax: 305.529.9510 Phone: 305.529.9506**