

JEWISH MUSEUM OF FLORIDA Purim Night at the Museum 2012 Response Card

Name(s) _____

Address _____

City, State, Zip _____

Day Phone _____ E-Mail _____

Yes! I/We will join the celebration – Purim Night at the Museum 2012.

Please reserve _____ seats at \$300 per person or Bronze Sponsors with 10 seats at \$5,000 per table.
\$175 per person is a tax-deductible contribution.

I/We cannot attend, but have enclosed a tax-deductible contribution to help support the
Museum's programs.

Enclosed is a check payable to the Jewish Museum of Florida for \$ _____ OR

Charge my account (circle): **American Express** **Visa** **Master Card**

in the amount of \$ _____

Account Number _____

Name (on the card) _____ Exp. Date _____

Please check one: ___ Our/My table guests are listed below, or ___ We/I would like to be seated with:

RSVP by March 2, 2012 • Limited to 200 guests

Complimentary Valet Parking. For more information on sponsorships, please call 786-972-3164.