



HISTORIC ALEXANDRIA FOUNDATION 2009 ANTIQUES SHOW
Response Card

Name(s): _____

Address : _____

E-mail : _____

Telephone : _____

Reservations

___ (number) attending the Preview Party at \$150 each \$ _____

___ (number) attending Toasting Our Town at \$60 each \$ _____

Total: \$ _____

I would like to support the show as a:

Benefactor - \$1,500 Patron - \$1,000 Sponsor - \$ 500 \$ _____

I am unable to attend, but enclose my contribution of \$ _____

Total: \$ _____

Benefactors receive 4 reservations for the preview party and 4 for the Toasting Our Town. Patrons receive 4 reservations for the Preview Party and 2 for Toasting Our Town. Sponsors receive 2 reservations for the Preview Party and for Toasting Our Town. Benefactors, Patrons, and Sponsors will be honored at a special reception at a private home in Old Town on Sunday, November 1st. All contributors will be listed in the catalogue and enjoy continuous admission to the show.

Reservations for the Preview Party will be held at the door.

Please make checks payable to: Historic Alexandria Foundation.

Pay by Credit Card: ___ Mastercard: ___ Visa:

Name: _____

Credit Card Number _____ exp _____

CCV Code (3 digit code on back of card): _____

Signature: _____

For further information call 703.549.5811 or visit our web site

WWW.HISTORICALEXANDRIAFOUNDATION.ORG

