

BRAIN INJURY ASSOCIATION OF ILLINOIS

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E-Mail: info@biail.org
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22nd Annual Luncheon Raffle and Shopping
"It's March 8th – Let's Celebrate!"
Saturday, March 8, 2025

Sponsorship

_____ **Platinum** Sponsorship - \$3,000

_____ **Bronze** Sponsorship - \$500

_____ **Gold** Sponsorship - \$2,000

_____ **Ruby** Sponsorship - \$250

_____ **Silver** Sponsorship - \$1,000

_____ **Basket** Sponsorship - \$100

Sponsorship Total \$ _____

I would like to contribute \$ _____ to the Brain Injury Association of Illinois.

_____ **Basket Contribution (\$100 Value)** – I would like to contribute a basket for the raffle

Tickets _____ Fashion Show ticket(s) - \$50 per person \$ _____

_____ Child's Plate for children 10 and younger - \$23 \$ _____

_____ Table(s) of 8 - \$400 per table \$ _____

Grand Raffle Tickets

_____ 1 Ticket - \$5 _____ 6 Tickets - \$25 \$ _____

Total Amount \$ _____

[] Enclosed is my check in the amount of \$ _____

[] Please bill \$ _____ to my credit card (VISA MasterCard Discover)

CREDIT CARD INFORMATION (purchases can also be made online at www.biail.org):

Name (as listed on card) _____

Credit Card # _____ Exp. Date _____ CVN Code (on the back) _____

E-Mail Address (for electronic receipt) _____

Signature authorizing credit card payment _____

REGISTRATION INFORMATION:

Name _____

Address _____

City _____ State _____ Zip _____

Daytime Phone _____ Please add my name to your mailing list for future events

Please seat me at a table with: _____