

**32<sup>nd</sup> ANNUAL DR. MARTIN LUTHER KING, JR. BIRTHDAY BREAKFAST**

*Cooperation, Peace, Acceptance and Caring*

**MONDAY, JANUARY 16, 2017**

GREATER COLUMBUS CONVENTION CENTER IN BATTLE GRAND

400 North High St | Columbus, OH 43215

Doors Open 7:00am | Program Begins 7:30am | Adjournment 10:00am

Please Print Clearly      DATE \_\_\_\_\_

ORGANIZATION \_\_\_\_\_

CONTACT NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE \_\_\_\_\_ FAX \_\_\_\_\_

EMAIL \_\_\_\_\_

**GENERAL SEATING**

_____ Ticket @ \$40.00 each.....	\$_____
_____ Table seating ten @ \$400.00 each.....	\$_____
_____ Donation unable to attend .....	\$_____

**SPONSORSHIP LEVELS**

_____ Premier \$25,000 (5 Special Section Reserved Tables).....	\$_____
_____ Platinum \$15,000 (4 Special Section Reserved Tables).....	\$_____
_____ Gold \$10,000 (3 Special Section Reserved Tables).....	\$_____
_____ Silver \$5,000 (2 Special Section Reserved Tables).....	\$_____
_____ Bronze \$2,000 (1 Special Section Reserved Table).....	\$_____

*Make check payable to:*  
**Martin Luther King Breakfast Committee, Inc.**

P.O. Box 83134  
Columbus, Ohio 43203

**Postmarked by December 30, 2016**

**TOTAL ORDER AMOUNT .....**\$\_\_\_\_\_

FOR STAFF USE ONLY

Date Received \_\_\_\_\_ Check No. \_\_\_\_\_

Ticket Number(s) \_\_\_\_\_ Quantity \_\_\_\_\_

Ticket Number(s) \_\_\_\_\_ Quantity \_\_\_\_\_

Ticket Number(s) \_\_\_\_\_ Quantity \_\_\_\_\_

Date Mailed \_\_\_\_\_ Initials \_\_\_\_\_

**TICKET ORDER FORM**

