Annual Spring Gala MONDAY MAY 12, 2025

Responses received by April 28th, 2025 will be included in the evening's program.

□ \$45,000 Co-Sponsor: Premier table for 10, logo in program, with tribute ad (or logo) on screens at the event, and listing on the Theatre's website.			n table for 10, Partner listing ir or logo) on screens at the event, 's website.
\$20,000 Patron: Priority table for 10, Patron listing in program, with tribute ad (or logo) on screens at the event, and listing on the Theatre's website.			le for 10, Benefactor listing in or logo) on screens at the event 's website.
TICKETS I/We will purchase ticket(s):			
#\$3,000 Supporter Ticket(s). Priority seating and Supporter listing in program.		#\$2,000 Donor To Donor listing in program	Ficket(s). Preferred seating and
All but \$350 per ticket is	tax-d	eductible.	
JEFFREY HOROWITZ LEGACY FUND			
□ I/We would like to support the Jeffrey Horowitz Legacy Fund The Jeffrey Horowitz Legacy Fund celebrates Jeffrey's 46 years of final season as well as future seasons unde the incoming Artistic www.tfana.org/HorowitzLegacy.	f visic	nary leadership of TFAN	A. The Fund will support this edges can also be made at
CONTRIBUTION			
□ I/We cannot attend but wish to make a fully tax-deductible cont	ributi	on of \$	
TRIBUTE AD			
 \$3,000 for a tribute ad (or logo) appearing on screens during th Image (ad or logo) size should be 1920 x 1080 pixels (16:9) and a for layout, please contact Gavin McKenzie at gmckenzie@tfana. Reservation deadline: May 5, 2025 	should		jpg files. To provide tribute tex
Enclosed please find a check for \$paya	ble to	Theatre for a New Aud	ience.
Enclosed please find a check for \$paya		MasterCard	American Express
Enclosed please find a check for \$paya Please charge a total of: \$to myVisa		MasterCard _Signature	American Express
Enclosed please find a check for \$paya Please charge a total of: \$to myVisa Name (as on card)	Ex	MasterCard _Signature p	American Express
Enclosed please find a check for \$paya Please charge a total of: \$to myVisa Name (as on card) Card Number You may also purchase tables and tickets, and make contributions Name(s) PLEASE PRINT AS YOU WISH TO BE LISTED Address	Ex	MasterCard _Signature p	American Express CVV [at: tfana.org/gala.
Enclosed please find a check for \$paya Please charge a total of: \$to myVisa Name (as on card) Card Number You may also purchase tables and tickets, and make contributions Name(s) PLEASE PRINT AS YOU WISH TO BE LISTED Address	_Ex c, thro te	MasterCard _Signature p ugh our secure web portal	American Express CVV dat: tfana.org/gala. Zip
Enclosed please find a check for \$paya Please charge a total of: \$to myVisa Name (as on card) Card Number You may also purchase tables and tickets, and make contributions Name(s) PLEASE PRINT AS YOU WISH TO BE LISTED Address City Sta Cell Phone	_Ex c, thro te	MasterCard _Signature p ugh our secure web portal	American Express CVV dat: tfana.org/gala. Zip
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Enclosed please find a check for \$paya Please charge a total of: \$to myVisa Name (as on card) Card Number You may also purchase tables and tickets, and make contributions Name(s) PLEASE PRINT AS YOU WISH TO BE LISTED Address City Sta Cell Phone Please list your guests' names and cell phone numbers: 1	Ex ;, thro te 6 7 8	MasterCard _Signature p ugh our secure web portal nail	American Express CVV [at: tfana.org/gala.

Reservations are to be paid by the night of the Gala.

For additional information, please contact Gavin McKenzie at 646-553-3890, or through email at gala@tfana.org.