Sponsor Reply Form

Donor Name/Company Name *Please list the donor name(s) exactly as they should appear in print.*

Contact Name T	Γitle		
St. Anthony Shrine will contact this person regarding guest list and donor benefits. Address			
		City State	Zip
		E-mail Address	Telephone
We would like to support St. Anthon	IY SHRINE		
☐ Franciscan Presenting Sponsor - \$100,000	□ St. Clare Sponsor - \$15,000		
□ Assisi Sponsor - \$50,000	☐ Arch Street Sponsor - \$10,000		
☐ St. Anthony Sponsor - \$25,000	□ Shrine Sponsor - \$5,000		
We would like to support with a te	RIBUTE MESSAGE AD		
□ Full-page ad - \$2,000			
☐ Half-page ad - \$1,000			
PAYMENT OPTIONS			
☐ My gift of \$is enclosed	Donor Advised Fund		
\Box Check payable to St. Anthony Shrine			
□ Credit card			
☐ Please invoice address above			
AMEX/MasterCard/VISA/Discover Number	CVV#		
Expiration Date Amount	Signature		
	orginature		
Please return this reply form, identifyi	ING YOUR LEVEL OF COMMITMENT TO:		
Maryanne Rooney-Hegan			
Director of Development			
St. Anthony Shrine			
too Arch Street			
Boston, MA 02210			
E mail: mrooneyhegan@stanthonyshrine.org			