



**STATE OF THE ART BALL**

Saturday, May 15, 2010

6:00 pm – 11:00 pm

Country Club of Virginia

**TICKET SALES FORM**

**Individual Attendee Cost:**  \$125 per person    **Table of 10:**  \$ 1,250

**Number of Tickets:** \_\_\_\_\_ x \$125.00    **Amount \$** \_\_\_\_\_

**Method of Payment:** (mc) (vs) (amex) (check payable to Hayes Foundation) or (cash)

**Credit Card Number:** \_\_\_\_\_ exp. \_\_\_\_\_

**Name on Card** \_\_\_\_\_  
For a faster check in, would you like to use this credit card the night of the event?    Yes    No

**ATTENDEE (s) :** \_\_\_\_\_

**Company** \_\_\_\_\_  
(If sitting at a corporate table, please indicate name of table)

**Address** \_\_\_\_\_

**City** \_\_\_\_\_    **State** \_\_\_\_\_    **Zip** \_\_\_\_\_

**Telephone:** \_\_\_\_\_    **Email** \_\_\_\_\_

**Person who sold ticket** \_\_\_\_\_

**Contact Person to receive ticket form**

All tickets sold must have an attendee form filled out prior to the event, and tickets must be paid for in advance.

No tickets will be distributed. Check in at the door.

[www.hayesfoundation.org](http://www.hayesfoundation.org)

or 804-708-0033 for more information.

If you have purchased multiple tickets or a table, please fill out the below information and return with the previous page.

Individual Contact: \_\_\_\_\_

Company: \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email: \_\_\_\_\_

**\*Please list other guests for your table: (This will ensure a prompt check-in)**

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Please contact Jenni Lee Crocker with questions. Tel. (804) 344.4626 Fax: (804) 344.6030  
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