

YES, I'll be there for the First Look.

Ticket Price: \$175 per person

Please charge my:

VISA MasterCard Discover American Express

Total Amount: _____

Credit Card Number: _____

Expiration Date: _____ Security Code: _____

Name as it appears on card: _____

Signature: _____

Donations: In addition to my ticket payment, I am also enclosing a donation to Ronald McDonald House of Akron in the amount of \$_____

I cannot attend, but please accept my donation to Ronald McDonald House of Akron in the amount of \$_____

Checks may be made payable to Ronald McDonald House of Akron.

Billing Address: _____

City: _____ State: _____

ZIP: _____ Phone: _____

Email: _____

Sponsorship Levels

- Big Mac® Sponsorship: \$25,000
- Quarter Pounder® Sponsorship: \$10,000
- Double Cheeseburger Sponsorship: \$5,000
- McNuggets® Sponsorship: \$1,000
- French Fries Sponsorship: \$500

(Please see enclosed card for more information).



Ronald
McDonald
House®
Akron

Number Attending: _____

Please provide names as you would like them to appear on a name tag:

Name: _____

Name: _____

Name: _____

Name: _____

Name: _____

Name: _____

Name: _____

Name: _____

For reservations or more information, please contact
Aristea Tzouloufis at 330-253-5400 or aristea@rmhakron.org.