



Princeton Child Development Institute
Enriching the lives of people with autism

Spring Sensations 2010
Saturday, April 24

___ We would like to underwrite Spring Sensations as a **PLATINUM BENEFACTOR** with a \$10,000 donation. Please reserve a table for 12 guests. Your support of this event will be recognized on our website and a full page ad in the event program. With your approval, press releases will be sent to local newspapers.

___ We would like to support PCDI as a **GOLD BENEFACTOR** with a \$5,000 donation. Please reserve a table for 10 guests. Your support of this event will be recognized on our website and a 1/2 page ad in the event program.

___ We would like to support PCDI as a **SILVER SPONSOR** with a \$3,000 donation. Please reserve a table for 10 guests. Your support of this event will be recognized on our website and in the event program.

___ We would like to support PCDI as a **BRONZE SPONSOR** with a \$1,000 donation. Please reserve 2 seats at a table. Your support of this event will be recognized on our website and in the event program.

___ We are unable to attend, but would like support PCDI as a Sponsor with a \$_____ donation. Your support will be recognized in the event program.

Name _____

Company _____
(as you would like it to appear in the program listing)

Address _____

_____ Telephone _____

Please make check payable to PCDI-Spring Sensations. Contributions are tax-deductible excluding \$100 per person for dinner. No tickets will be mailed; your guests' names will be held at the door. Our Tax ID number is 22-191-2964.

If you know the names of those attending, please list them here:

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

7. _____ 8. _____

9. _____ 10. _____

11. _____ 12. _____

Please return to: **Princeton Child Development Institute**

Spring Sensations 2010

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