



Hawaii Youth Symphony
Learn | Perform | Grow

HE MAKANA O NA MELE: The Gift of Music
Sunday, November 15, 2009
Hilton Hawaiian Village Coral Ballroom
A Night at the Opera with WILLIE K and the Youth Symphony I

Yes, I want to support the young musicians of the Hawaii Youth Symphony!

Name: _____

Company: _____

Name as you wish to be listed: _____

Contact Name: _____

Address: _____

City, State, Zip: _____

Day Phone: _____ Evening Phone: _____

E-mail address: _____

I would like to reserve the following **sponsor table(s)**:

_____ Maestro's Circle Table(s) x \$5,000 = \$_____ (\$3,700 is tax-deductible to the extent allowable by law)

_____ Concertmaster's Circle Table(s) x \$3,500 = \$_____ (\$2,500 is tax-deductible to the extent allowable by law)

_____ Principal's Circle Table(s) x \$2,000 = \$_____ (\$1,350 is tax-deductible to the extent allowable by law)

_____ Soloist's Circle Table(s) x \$1,000 = \$_____ (\$400 is tax-deductible to the extent allowable by law)

I would like to reserve:

_____ Preferred Seat(s) x \$200 = \$_____ (\$140 is tax-deductible to the extent allowable by law)

_____ Individual Seat(s) x \$85 = \$_____ (\$25 is tax-deductible to the extent allowable by law)

_____ Family Table(s) x \$800 = \$_____ (Table of 10, \$200 is tax-deductible to the extent allowable by law)

I cannot attend, but would like to make a 100% tax-deductible contribution to HYS.

I have enclosed my check made payable to HYS in the amount of \$_____.

Please charge \$_____ to my Visa MasterCard Amex Discover

(A \$20 per table or \$2 per individual ticket fee will be automatically added to payments made by credit card.)

Credit Card # _____ Exp. Date: _____

Signature: _____

Return this order form with your payment to HYS, 1110 University Avenue, Suite 200, Honolulu, HI 96826 or fax to 941-4995. For more information call 941-9706 or visit www.HiYouthSymphony.org. Please return this form by October 30, 2009. MAHALO!