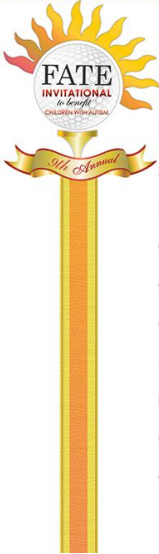


R.S.V.P

MAIL TO: THE FOUNDATION FOR AUTISM
TRAINING & EDUCATION
270 22ND AVENUE
BRICK, NEW JERSEY 08724



WEEKEND GETAWAY IN BOCA *R.S.V.P. by January 15, 2016*

NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

DAYTIME TELEPHONE NUMBER _____ EMAIL _____

CARDHOLDER NAME _____ \$ _____

CREDIT CARD # _____ EXP _____

CARDHOLDER SIGNATURE _____

BILLING INFO SAME AS ABOVE - PLEASE CHECK ONE YES NO

IF NO, FILL IN BELOW:

CARDHOLDER ADDRESS _____

CARDHOLDER ZIP CODE _____

over please

Participant Sponsorship Registration

- FOURSOME (PLEASE LIST BELOW) \$1,800
1. _____ 3. _____
2. _____ 4. _____
- INDIVIDUAL GOLFER (INCLUDES ROUND OF GOLF, LUNCH, COCKTAILS, DINNER & DANCING..... \$500
- COCKTAILS, DINNER AND DANCING ONLY (PER PERSON) \$150

Event Sponsorship Registration

- TITANIUM SPONSOR \$25,000
- PLATINUM SPONSOR \$15,000 PUTTING GREEN SPONSOR \$2,000
- GOLD SPONSOR \$10,000 DRIVING RANGE SPONSOR \$1,000
- SILVER SPONSOR \$5,000 AWARDS SPONSOR \$1,000
- LUNCH HOST \$3,000 HOLE/TEE SPONSOR \$750
- HALFWAY HOUSE SPONSOR \$3,000 GOLF CART SPONSOR \$500

- MY CREDIT CARD INFORMATION IS SUPPLIED ON REVERSE
- ENCLOSED IS MY CHECK (PAYABLE TO FATE) \$: _____
- I AM UNABLE TO PARTICIPATE. PLEASE ACCEPT MY DONATION: _____
- FOR CORPORATE SIGNAGE, PLEASE EMAIL LOGO IN PDF OR JPEG FORMAT TO INFO@THEFATE.ORG**