

SPECIAL  
PERFORMANCE BY:

**GOO GOO  
DOLLS**

41ST ANNUAL

**CHRISTUS  
GALA**

Saturday, April 20, 2024  
Beaumont Civic Center

Name: \_\_\_\_\_

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

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

**TABLE RESERVATIONS:**

\_\_\_ HERITAGE CIRCLE \$75,000

\_\_\_ LEGACY CIRCLE \$50,000

\_\_\_ CHAIRMAN'S CIRCLE \$25,000

\_\_\_ PRESIDENT'S CIRCLE \$15,000

\_\_\_ VISIONARIES \$10,000

\_\_\_ BENEFACTOR \$5,000

\_\_\_ PARTNER \$3,000 (LIMITED AVAILABILITY)

**Add on Individual Seating: (max 2)**

Visionaries Level: \$1,250 \_\_\_ Benefactor Level: \$625 \_\_\_ Partner Level: \$375 \_\_\_

*Individual Tickets - \$375 - If available, individual tickets will go on sale approx. March 4, 2024*

**UNDERWRITING OPPORTUNITIES:**

\_\_\_ \$7,500

\_\_\_ \$4,000

\_\_\_ \$2,000

I am unable to attend, but would like to make a tax-deductible donation of \$\_\_\_\_\_

\_\_\_ Enclosed is my check, payable to **CHRISTUS SOUTHEAST TEXAS FOUNDATION**

\_\_\_ Please charge my payment to: \_\_\_ American Express \_\_\_ Discover \_\_\_ MasterCard \_\_\_ Visa

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

**GUEST NAMES:**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

**PRESIDENT'S CIRCLE AND ABOVE:**

9. \_\_\_\_\_

10. \_\_\_\_\_

There are no tickets issued for this event. Guest names are needed to facilitate check-in. If you do not yet have your guest list finalized at this time, please call 409.236.7555 or email SETX.Foundation@ChristusHealth.org with your list at least three days prior to the event.

**Please return this form along with payment to: CHRISTUS Southeast Texas Foundation 2830 Calder St., Beaumont, TX 77702**