

The State Ballet of RI's 8th Annual Partner with the Arts, "Evening Under the Stars"

- ☐ Enclosed is my/our check for \$ _____ for _____ reservations. Please list names of attendees on back.
- ☐ I/We cannot attend. Enclosed is my tax deductible donation for \$ _____.

"Golden Sponsor" _____ "Silver Sponsor" _____
"Bronze Sponsor" _____ "Patron Sponsor" _____

The State Ballet of Rhode Island is a 501 C3 organization.

Checks made payable to The State Ballet of RI

Name: _____

Address: _____

City/ST/Zip: _____

Telephone: _____

Email: _____

RSVP by May 30, 2011. Reservations held at the door.

Driving directions may be found at www.stateballet.com

For more information, please call 401.334.2560

The State Ballet of Rhode Island

Names of Attendees:

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

