



20th Anniversary fundraiser to benefit Make-A-Wish® Hudson Valley

Black & White Masquerade Ball

Non-Member Payment Form

Contact Name: _____ Contact #: _____

Contact Email Address: _____

Company: _____

Number of _____ tickets @ \$100 each

Total payable to the **Hudson Gateway Realtor Foundation**: \$ _____

Checks: Please return this form with payment.

_____ Check enclosed (**Payable to HUDSON GATEWAY REALTOR® FOUNDATION**) Mail to:
Mary Prenon, Hudson Gateway Association of Realtors, One Maple Avenue, White Plains, NY 10605

Credit Card Payments: Fax: 914.681.6044 or Email: Mary.Prenon@hgar.com

_____ Charge my VISA, MasterCard, Discover or American Express account

Credit Card # _____ Expiration: _____ / _____ Security Code: _____

Signature: _____

*The Hudson Gateway Realtor Foundation, Inc. is a 501(c)(3) not-for-profit charitable organization.
Your contribution is tax deductible to the extent allowed by law.*

Questions: Contact **Mary** at: **Mary.Prenon@HGAR.com** or call **914.681.0833**

Please include names of attendees:

Name

Name

Name

Name

Name

Name

Be a part of the Magic as we help grant another child's wish in the Hudson Valley

Hudson Gateway Association of REALTORS®
Hudson Gateway Multiple Listing Service, Inc.
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