THE WE CARE FUND OF THE NASSAU BAR FOUNDATION AND THE NASSAU COUNTY WOMEN'S BAR ASSOCIATION INVITE YOU TO

DRESSED TO A TEA: THERE'S MAGIC IN THE AIR

ANNUAL FASHION SHOW AND BUFFET DINNER

THURSDAY, MARCH 26, 2020

5:30PM AT THE NASSAU COUNTY BAR ASSOCIATION

$50 PER PERSON

Donations of new and gently used men's and women's business appropriate clothing, children's clothing, prom dresses, tuxedos, and accessories will be collected to benefit local charities. Donations will be accepted at the Nassau County Bar Association from Monday, March 22 through Thursday, March 26.

QUESTIONS?
Contact Bridget Ryan at (516) 747-4070 ext. 1226
or bryan@nassaubar.org.
# SPONSORSHIPS AND TICKETS

<table>
<thead>
<tr>
<th>Sponsor</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>GRAND ILLUSION</td>
<td>$3,500</td>
</tr>
<tr>
<td>CRYSTAL BALL</td>
<td>$2,500</td>
</tr>
<tr>
<td>WIZARD</td>
<td>$1,500</td>
</tr>
<tr>
<td>ENCHANTRESS</td>
<td>$750</td>
</tr>
<tr>
<td>ABRACADABRA</td>
<td>$500</td>
</tr>
<tr>
<td>HOCUS POCUS</td>
<td>$400</td>
</tr>
<tr>
<td>CHARMED</td>
<td>$250</td>
</tr>
<tr>
<td>ALCHEMIST</td>
<td>$100</td>
</tr>
<tr>
<td>EVENT TICKET</td>
<td>$50</td>
</tr>
</tbody>
</table>

NAME_____________________________________________________________________________________________________

TELEPHONE NUMBER___________________________________________________________________________________

EMAIL_____________________________________________________________________________________________________

I would like to be the following Sponsor: _______________ Amount: _______________
I would like the following number of tickets: _______ x $50  Amount: _______________
I cannot attend but enclosed is my donation of: _______________________________

☐ CHECK ENCLOSED—PAYABLE TO NASSAU BAR FOUNDATION – WE CARE

☐ CHARGE BY CREDIT CARD FOR: $__________

NAME ON CARD: ______________________________________________________________________________________________

CREDIT CARD NUMBER: __________________________________________________________________________________________

EXP. DATE: ______________ SECURITY CODE: __________ BILLING ZIP: ______________

MAIL TO:
   WE CARE FUND
   ATTN.: DRESSED TO A TEA
   15TH & WEST STREETS
   MINEOLA, NY 11501