



# Austin Pregnancy Resource Center (APRC) FALL Extravaganza

*“Off the Fence” (Daniel 3:17 the God we serve is able to deliver us from it . . .)*

**Tuesday, September 27, 2011 at the Austin Double Tree Hotel**

## Sponsorship Opportunities

YES!!! I want to partner with APRC in *Building a Culture of LIFE . . . in the City . . . for the City!!*

\_\_\_\_\_ Sign me up to be a Champion - \$5,000 Sponsorship

\_\_\_\_\_ Sign me up to be a Defender - \$2,500 Sponsorship

\_\_\_\_\_ Sign me up to be an Encourager - \$1,000 Sponsorship

\_\_\_\_\_ Sign me up to be an Angel - \$500 Sponsorship

\_\_\_\_\_ Check enclosed (\_\_\_\_\_ sponsor levels at \$\_\_\_\_\_)

\_\_\_\_\_ Credit Card (Please circle: Amex    Visa    MC    Discover)

Card Number: \_\_\_\_\_ Security Code: \_\_\_\_\_

Expiration Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Signature: \_\_\_\_\_

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

How you would like your name/company to appear in the *“Off the Fence”* program:

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Please return this form by either email: [lori@austinprc.org](mailto:lori@austinprc.org), FAX: 512-476-7717 or  
mail to: 2717 Rio Grande Street, Austin, TX 78705.

***Please make all checks payable to: Austin Pregnancy Resource Center (APRC). Contributions are tax deductible.***

# Your Guest List

10 Seats per Table

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

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

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

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

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

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

City, State, Zip: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

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

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

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

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

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

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

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

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

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

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

City, State, Zip: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

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

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

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

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

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

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

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

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

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

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

City, State, Zip: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

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

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

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

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

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