

# Say Goodbye and Thank You to Jeff Brokamp!

Name: \_\_\_\_\_ WH Class of: \_\_\_\_\_

Name: \_\_\_\_\_ WH Class of: \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

\_\_\_\_\_ Number attending: **Open House — No Charge**

\_\_\_\_\_ Number attending: **Dinner Program**  
\$100.00 per person / \$178.00 per couple / Cash Bar

\_\_\_\_\_ We are unable to attend, please accept our Brokamp Family Scholarship contribution.

## Sponsorship Levels:

\_\_\_\_\_ **Magna Cum Laude:** \$ 500. (includes 1 table for 8)\*

\_\_\_\_\_ **Summa Cum Laude:** \$1,000 (includes 2 tables for 8)\*

\_\_\_\_\_ **Sursum ad Summum:** \$1,978 (includes 2 tables for 8 and an invitation to the Senior Awards Night when the first Brokamp Family Scholarship will be awarded.)\*

*\*all sponsorship levels include signage and listing in program book*

Name to appear on sponsorship: \_\_\_\_\_

\$ \_\_\_\_\_ Total amount enclosed

Table listing opportunities on reverse of card

Please make check payable to and mail to: **WHHS Alumni Foundation**

Please charge my \_\_\_\_\_ Visa / Mastercard (circle one)

# Exp. Date \_\_\_\_\_ CVV \_\_\_\_\_

## Please RSVP by May 25, 2017

## Table Guests

1.

2.

3.

4.

5.

6.

7.

8.

1.

2.

3.

4.

5.

6.

7.

8.