

The National High School Musical Theater Awards "The Jimmy™ Awards"

Named in honor of

James M. Nederlander, esteemed Man of the Theater

Monday, June 25, 2012 - 7:30pm

The Minskoff Theatre on Broadway

Reply Card

Please reserve the following:

- | | |
|--|--|
| <input type="checkbox"/> Palace \$25,000 | <input type="checkbox"/> Oriental \$1,000 |
| <ul style="list-style-type: none">• 10 Premium orchestra tickets• 10 Post-show reception tickets• Premium placement of full page ad in program• Banner ad on the NHSMTA homepage• On-stage thank you from the host | <ul style="list-style-type: none">• 2 Orchestra tickets• 2 Post-show reception tickets• Listing in the program |
| <input type="checkbox"/> Pantages \$10,000 | <input type="checkbox"/> Greek \$500 |
| <ul style="list-style-type: none">• 6 Premium orchestra tickets• 6 Post-show reception tickets• ½ page advertisement in the program• Listing on the NHSMTA homepage• On-stage thank you from the host | <ul style="list-style-type: none">• 1 Orchestra ticket• 1 Post-show reception ticket• Listing in program |
| <input type="checkbox"/> Aldwych \$5,000 | <input type="checkbox"/> Fisher \$125 |
| <ul style="list-style-type: none">• 4 Premium orchestra tickets• 4 Post-show reception tickets• Listing in the program• On-stage thank you from the host | <ul style="list-style-type: none">• 1 Orchestra ticket (industry rate)• Listing in program |

Please make checks payable to:

NHS Musical Theater Awards™ Education Fund and mail to: **NHSMTA, c/o Broadway Education Alliance, 226 W. 47th St., 9th Floor, New York, NY 10036**

Contributions to the National High School Musical Theater Awards Education Fund support the educational efforts of the National High School Musical Theater Awards - "The Jimmy™ Awards" and are tax deductible to the fullest extent allowed by law.

For additional information, please call: Wynne Fedele at **412-281-3973 ext. 232** or email: wfedele@nhsmta.com

Program Listing: Please list your name and/or company exactly as you would like it to appear in the program using the space below:

Contribution: I am unable to attend, but I am pleased to support the NHS Musical Theater Awards™ with my tax-deductible contribution in the amount of \$ _____

Name _____

Title _____

Company: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

E-mail Address: _____

PAYMENT INFORMATION:

Please Charge my Credit Card: (check one)    

Card Number: _____ Exp. Date: _____

Name on Card _____

Signature: _____