SALUTE TO CHAMPIONS UNDERWRITER REGISTRATION FORM



Salute to Champions™ benefiting Texas Children's Cancer and Hematology Centers	YES, I will be a contributor to <i>Salute to Champions</i> , benefiting Texas Children's Cancer and Hematology Centers, at the following level (please check one):			
•	\$35,000 HOPE \$25,000 COURAGE			COMMITMENT INVOLVEMENT
David Canasta Harris				
Royal Sonesta Houston Thursday, September 24, 2020	\$15,000 COMPASSION		\$3,000	BELIEF
	Donation Only. I to accept any of the benefits			my donation. I do not wish
Name or company name as it should be printed		Contact name		
Address		City, State 2	ZIP	
Telephone Fax		Email		
including brochures, website p	e "Media Materials") and to use, re ostings, marketing materials, and p Children's Hospital will detach and shred the	produce, distribublications desc	oute, and publish the Medi cribing TCH's developmen	a Materials in any manner,
Payment Options (please check				
Enclosed is my check made payable to Texas Children's Hospital		To be listed in the invitation, please return the completed reply form by Monday, August 3, 2020.		
Please charge my (circle one): AMEX MasterCard Visa Discover		Register:		
Texas Children's Hospital will gladly accep	nt event donations from a donor- ts, all offered benefits must be waived.	Online:	texaschildrens.org/c	hampions
advised fund; however, per IRS requiremei		By fax:	832-825-1131	
Name on card (Please print)		By mail:	Salute to Champions Texas Children's Ho Suite 5214 PO Box 300630	
Card number			Houston, Texas 770	30-0630
Exp. date		Phone:	832-824-6917	
1 -		Contact:	champions@texasch	nildrens.org
Signature		de.		

Texas Children's Hospital