

Houston Center for Contemporary Craft - Crafting a Legacy 2021 Virtual Celebration Featuring Glenn Adamson, April 22nd, 6:00 – 7:00 PM

To be listed on the printed invitation, please mail this completed form
to the address below or email it to legacy@craftthouston.org by Monday, March 15th.

Contributions of \$500 and above will be listed on the event website, invitation, and virtual program.

Name (as you wish it to appear in print): _____

Address: _____

Phone*: _____ Fax: _____ Email*: _____

*Daytime phone and email are required. Virtual program link will be sent to this email address.

☐ **Yes, I want to join the Host Committee!**

Host Committee members help to promote the event and will be listed on
upcoming promotional materials.

LEAD UNDERWRITING LEVELS

*Includes private virtual meet-and-greet with Glenn Adamson; a signed copy of his new book,
Craft: An American History; and gourmet refreshments
Additional recognition on the title wall of a 2021 exhibition of your choice
Fair market value \$100*

Connoisseur _____ **\$25,000**

Cognoscente _____ **\$10,000**

Collector _____ **\$15,000**

Collaborator _____ **\$5,000**

UNDERWRITING LEVELS

*Includes private virtual meet-and-greet with Glenn Adamson; a signed copy of his new book,
Craft: An American History; and gourmet refreshments
Fair market value \$100*

Crafty _____ **\$2,500** **Creative** _____ **\$1,500** **Curator** _____ **\$1,000**

☐ Please credit my gift to the Phyllis Childress Crafting a Legacy Fund.

Individual Ticket Levels listed on back.

_____ I cannot attend, but would like to contribute \$_____ in honor/memory of:

_____.

INDIVIDUAL TICKETS

\$500 VIP Ticket with Signed Book x _____

Includes a signed copy of Craft: An American History, Fair market value \$30

\$100 Supporting Ticket with Book x _____

Includes a copy of Craft: An American History, Fair market value \$30

\$50 Supporting Ticket x _____

_____ I would like to sponsor a resident artist to attend. _____ artist(s) at \$50 each = _____

\$15 Single Ticket x _____

PAYMENT INFORMATION

_____ Enclosed is a check in the amount of \$ _____, payable to HCCC.

_____ Please charge \$ _____ to my: _____ AMEX _____ MasterCard _____ Visa

Credit Card #: _____ Expiration Date: _____ CVC#: _____

Name on Card: _____ Signature: _____

Billing Address: _____

Notes: _____