



American Heritage Awards | Registration Form

_____ This is my payment

_____ This is my pledge

Sponsorship Levels: [View more information on sponsor level benefits.](#)

_____ Title Sponsor: \$50,000

_____ Statue of Liberty: starting at \$20,000

_____ Benefactor: starting at \$10,000

_____ Patron: starting at \$5,000

_____ Supporter: starting at \$1,000

Individual tickets: I would like to purchase _____ individual tickets at \$250 each.

Contact Information

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

*Sponsors: Please list my/our name in the program as: _____

Payment

Credit card: Amount: \$ _____ ___ Visa ___ MC ___ Amex ___ Discover

Name on card: _____

Card Number: _____ Exp. Date: _____

Signature: _____

Checks: Please make checks payable to “American Immigration Council” and mail to:

American Immigration Council

Att: Megan Hess

P.O. Box 759466

Baltimore, MD 21275

If you have any questions please email us at aha@immcouncil.org