



2010 Table Host Commitment Form

Table Host Name _____
(Please list your name as you would like it to appear in print materials.)

	Number of Tables	Total
<input type="checkbox"/> Young Jayhawk Table \$1,000 <small>(Table Host is within 10 years of his/her 1st degree from KU and/or under the age of 32)</small>	_____	= \$ _____
<input type="checkbox"/> Jayhawk Contributor Table \$1,500	_____	= \$ _____

In order to receive printed name recognition in the Rock Chalk Ball Program, full payment and a completed form are due no later than Friday, March 26, 2010.

Please list all guests to be seated at your table (including yourself). Once full payment and the completed form is received, we will mail an invitation to you and your guests.

1. Your Name _____
 Address _____
 City _____ State _____ Zip _____
 KU Graduate ___yes___ ___no___ Year _____

6. Name _____
 Address _____
 City _____ State _____ Zip _____
 KU Graduate ___yes___ ___no___ Year _____

2. Name _____
 Address _____
 City _____ State _____ Zip _____
 KU Graduate ___yes___ ___no___ Year _____

7. Name _____
 Address _____
 City _____ State _____ Zip _____
 KU Graduate ___yes___ ___no___ Year _____

3. Name _____
 Address _____
 City _____ State _____ Zip _____
 KU Graduate ___yes___ ___no___ Year _____

8. Name _____
 Address _____
 City _____ State _____ Zip _____
 KU Graduate ___yes___ ___no___ Year _____

4. Name _____
 Address _____
 City _____ State _____ Zip _____
 KU Graduate ___yes___ ___no___ Year _____

9. Name _____
 Address _____
 City _____ State _____ Zip _____
 KU Graduate ___yes___ ___no___ Year _____

5. Name _____
 Address _____
 City _____ State _____ Zip _____
 KU Graduate ___yes___ ___no___ Year _____

10. Name _____
 Address _____
 City _____ State _____ Zip _____
 KU Graduate ___yes___ ___no___ Year _____

**Reply requested no later than Friday, March 26, 2010:
 Rock Chalk Ball 2010, 1266 Oread Avenue, Lawrence KS 66045-3169 or fax 785-864-5397**