

ANNUAL

MASSACHUSETTS BLACK LAWYERS ASSOCIATION GALA

THURSDAY, MARCH 16, 2017

INDIVIDUAL RESERVATIONS, TABLE RESERVATIONS & ADVERTISEMENTS (Please submit by February 16, 2017)

TITLE					
COMPANY NAME/INDIVIDUAL NAME	(AS YOU WOULD LIKE IT TO	APPEAR ON EVENT MATERIA	LS)		
PRIMARY CONTACT					
ADDRESS					
CITY		STATE		ZIP	
PHONE					
EMAIL					
INDIVIDUAL RESERVATIONS (Ple	ease check one)				
O@ \$200	0_	@ \$150			
(Firms of 26 lawyers or more)	(Fire	(Firms of 25 lawyers or less - Government or Legal Service - Students)			
TABLE RESERVATIONS (Please che	eck one)				
O Table(s) of 10 @ \$2,000	0_	○ Table(s) of 10 @ \$1,500			
(Firms of 26 lawyers or more)	(Fire	(Firms of 25 lawyers or less - Government or Legal Service - Students)			
PROGRAM BOOK ADVERTISEM	ENTS (Please check one)				
O Full Page Color Ad	O Half Page	Color Ad		Page Color Ad	
5" X 8" \$1,000	5" X 3.5" \$700		2.25" X 3.5" \$500		
 All ads must be received in a hi Converted to CMYK color. Acceptable file formats are PDF Please email advertisement to 	or JPEG.				
O We are unable to attend, but w	ould like to support the N	1BLA by giving a donation	in the amount of \$	·	
TOTAL DUE \$					
PAYMENT OPTIONS (Please check	k one)				
O Enclosed is a check payable to	"Massachusetts Black La	wyers Association."			
O Please charge my: O Visa	○ MasterCard	O American Express			
NAME					
CARD NUMBER		EXP.	DATE	CVC CODE	

• C/O BOSTON BAR ASSOCIATION • 16 BEACON STREET • BOSTON, MASSACHUSETTS 02108 • www.massblacklawyers.org •