

**PLEASE NOTE:**

During this uncertain time related to COVID-19, and to protect the health and safety of everyone involved, the TAJC will be hosting video presentations of our speakers on our webpage in lieu of an in-person Gala.



I accept your invitation to support the **2020 Champions of Justice Gala** and will sponsor as a/an:

- Champion of Justice - \$30,000** per table which includes:  
Prime seating for ten, including one justice from the Supreme Court of Texas, if you so desire, logo and name recognition in the program, on the Commission and the Texas Access to Justice Foundation websites, social media sites, in the *Texas Bar Journal*, the *Access to JusticeUpdate* and all press releases.
- Advocate of Justice - \$20,000** per table which includes:  
Priority seating for ten, logo and name recognition in the program, on the Commission and the Texas Access to Justice Foundation websites, in the *Texas Bar Journal*, the *Access to JusticeUpdate* and all press releases.
- Benefactor of Justice - \$10,000** per table which includes:  
Preferred seating for ten, name recognition in the program, on the Commission and the Texas Access to Justice Foundation websites, in the *Texas Bar Journal*, the *Access to JusticeUpdate* and all press releases.
- Patron of Justice - \$5,000** per table which includes:  
Table seating for ten, name recognition in the program, on the Commission and the Texas Access to Justice Foundation websites, in the *Texas Bar Journal*, the *Access to JusticeUpdate* and all press releases.
- Other Contribution - \$\_\_\_\_\_.**

Name: \_\_\_\_\_ Texas Bar Card No.: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Company/Individual Name (as it should appear in materials): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Email: \_\_\_\_\_

I hereby pledge \$ \_\_\_\_\_.

I enclose my check for \$ \_\_\_\_\_. Please make checks payable to the Texas Access to Justice Foundation.

I hereby authorize a credit card payment: Name on Card: \_\_\_\_\_

Card No. \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CSV: \_\_\_\_\_

Signature: \_\_\_\_\_

For additional information, please contact Meredith Warren at 512.427.1859 or email [mwarren@texasbar.com](mailto:mwarren@texasbar.com)  
Contributions are tax deductible to the extent allowed by law.  
Federal Tax ID # 74-2354575.