

INTITUTE FOR MULTICULTURAL COMMUNICATIONS COOPERATION AND DEVELOPMENT, Inc.

Yes, I will attend the Celebration of Diversity on June 9 at the Princeton Club

Name: _____

I will bring _____ guest with me.

Total number of attendees: _____ x \$125.00 = \$ _____

No, I am unable to attend. However, I would like to contribute to IFMCCADI's mission and programs.

\$25 \$50 \$100 \$250 \$500 Other _____

Payment method in the amount of \$ _____

Check (made payable to IFMCCADI, include with RSVP)

Credit Card VISA MasterCard AMEX

Cardholder Name: _____

Card Number: _____

Expiration Date: ____/____/____ Security Code: _____

Billing Address:

Signature: _____

Please mail this card with your payment to:

IFMCCADI, 4 West 43rd St., Suite 801, New York, NY 10036



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Institute For
Multicultural Communications
Cooperation and
Development, Inc.