



FECC 23rd Annual Gala

Saturday, February 7, 2026

Please make the following reservations
and list guests on the reverse side



Underwriter Table for 10 \$ _____
 Patron Table for 10 at \$1750 \$ _____
 Seating at \$175/person x _____ = \$ _____
 Donation \$ _____
 I /We are unable to attend but
 sending a donation \$ _____
TOTAL \$ _____

• Make checks payable to: "Friends of Egyptian Children with Cancer" & mail to:
 P.O. Box 155, Bellaire, TX 77402-0155

• On-Line reservations by PayPal at:

www.fecchouston.org/feccc-gala-reservation

or Scan the QR Code with your smart phone camera



For more information email Dr. Samia Khalil at samiakhalil41238@gmail.com

GALA UNDERWRITING LEVELS

Each table seats 10 guests

- ☐ **DIAMOND UNDERWRITER TABLE - \$25,000**
- One table for 10 at the gala
 - Premium table seating
 - Recognition during the gala
 - Name recognition on website
 - Valet parking for the entire table
- ☐ **PLATINUM UNDERWRITER TABLE - \$15,000**
- One table for 10 at the gala
 - VIP table seating
 - Recognition during the gala
 - Name recognition on website
 - Valet parking for the entire table
- ☐ **GOLD UNDERWRITER TABLE - \$10,000**
- One table for 10 at the gala
 - Prime table seating
 - Recognition during the gala
 - Name recognition on website
- ☐ **SILVER UNDERWRITER TABLE - \$5,000**
- One table for 10 at the gala
 - High priority table seating
 - Name recognition on website
- ☐ **BRONZE UNDERWRITER TABLE - \$3,000**
- One table for 10 at the gala
 - Priority table seating
 - Name recognition on website
- ☐ **PATRON TABLE - \$1,750**
- Regular table seating

Please mark the appropriate box if selecting an Underwriter or Patron Table

RESERVATION MADE BY:

NAME: _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL: _____ PHONE: _____

The following names are guests at our table:

				Food Selection		
				Salmon	Chicken	Vegetarian
1. Guest Name _____	Email _____	Phone _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Guest Name _____	Email _____	Phone _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Guest Name _____	Email _____	Phone _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Guest Name _____	Email _____	Phone _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Guest Name _____	Email _____	Phone _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Guest Name _____	Email _____	Phone _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Guest Name _____	Email _____	Phone _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Guest Name _____	Email _____	Phone _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Guest Name _____	Email _____	Phone _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Guest Name _____	Email _____	Phone _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>