



# There Oughta Be a Law

**WRITERS GUILD INITIATIVE GALA 2026 MONDAY MARCH 30**

**I/WE WILL JOIN THE GALA HOST COMMITTEE AND AGREE TO PURCHASE AT LEAST TWO \$600 TICKETS OR MAKE A CONTRIBUTION OF \$1,200.**

*Donor Advised Funds may not be used to pay for Gala tables or tickets.*

### TABLES

#### \_\_\_\_\_ \$25,000 BENEFACTOR TABLE

- Premier table for ten guests.
- Full slide recognition in Virtual Journal at the event and on WGI web site for one year.
- Benefactors will have the opportunity to sponsor one writing workshop in their name during the season.

#### \_\_\_\_\_ \$10,000 PATRON TABLE

- Prime table for ten guests.
- Patron listing in Virtual Journal at the event and on WGI web site for one year.

### TICKETS

#### \_\_\_\_\_ \$1,000 SUPPORTER TICKET(S)

- Prime seat for dinner.
- Listing in Virtual Journal at the event.

#### \_\_\_\_\_ \$600 FRIEND TICKET(S)

- One seat for dinner.

*The estimated fair market value of goods and services is \$250 per person. The balance of ticket costs in excess of this amount is considered a tax-deductible contribution.*

### DONATE

**I/WE WANT TO MAKE A GIFT**

I/We cannot attend but enclose a fully tax-deductible contribution of \$\_\_\_\_\_.

**PLEASE RESPOND BY FEBRUARY 13, 2026 TO HAVE YOUR NAME INCLUDED ON THE GALA INVITATION.**

**TOTAL ENCLOSED \$** \_\_\_\_\_

My check, made payable to Writers Guild Initiative, is enclosed.

Please charge \$\_\_\_\_\_ to my credit card.

NAME ON CARD \_\_\_\_\_

CARD NUMBER \_\_\_\_\_

EXPIRATION \_\_\_\_\_

CVV CODE \_\_\_\_\_ BILLING ZIP CODE \_\_\_\_\_

Add 3% to my total amount to help cover the payment processing fee.

**EMAIL** completed form to [cnuaa@wgaeast.org](mailto:cnuaa@wgaeast.org), OR  
**MAIL** completed form and your payment to Writers Guild Initiative, 2026 Gala, 250 Hudson Street, 7th floor, New York, NY 10013, OR  
**REPLY ONLINE** to complete this form and make your payment by clicking button at right.  
**QUESTIONS?** Please contact: [cnuaa@wgaeast.org](mailto:cnuaa@wgaeast.org)

NAME (PLEASE PRINT CLEARLY AS YOU WISH TO BE LISTED) \_\_\_\_\_

COMPANY \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE (DAY) \_\_\_\_\_

EMAIL \_\_\_\_\_

**REPLY ONLINE**