

WEDNESDAY, APRIL 26

Preview Party
 6:00 - 10:00 p.m. _____ x \$125 ea. = \$ _____
 (\$75 tax deductible)

Reserved corporate
 tables of ten _____ x \$2500 = \$ _____

THURSDAY, APRIL 27

David Howard Highgrove Lecture
 10:00 - 11:00 a.m. _____ x \$25 ea. = \$ _____

Box Lunch
 11:00 a.m. - 2:00 p.m. _____ x \$17.50 ea. = \$ _____

Formal Luncheon
 Noon _____ x \$30 ea. = \$ _____

Julie Moir Messervy
 1:30 - 2:30 p.m. _____ x \$25 ea. = \$ _____

Flowers After Hours
 5:00 - 8:00 p.m. FREE
 (No reservation required. Register your quiz team at 612-870-3279
 or email friends@artsmia.org. Refreshments available for purchase.)

FRIDAY, APRIL 28

Dan Seefelt/Dan Kotecki
 10:00 - 11:30 a.m. _____ x \$25 ea. = \$ _____

Box Lunch
 11:00 a.m. - 2:00 p.m. _____ x \$17.50 ea. = \$ _____

Formal Luncheon
 Noon _____ x \$30 ea. = \$ _____

David Howard Organic Lecture
 1:30 - 2:30 p.m. _____ x \$25 ea. = \$ _____

SATURDAY, APRIL 29

**Debbie Bradley/Vicky Greer
 Windowbox Demonstration**
 10:30 - 11:30 a.m. _____ x \$10 ea. = \$ _____

Family Event (Registration Required)
 1:00 - 4:00 p.m. _____ x FREE _____
 # of children _____ # of adults _____

TOTAL: \$ _____

The Friends of the Institute invite you to become a significant participant in Art in Bloom as a Sweet Pea, Morning Glory or Snapdragon. Your contribution at one of these levels entitles you to special benefits. For details call 612-870-3279

I/We would like to become a Patron to Art in Bloom (amounts are per person) :

Sweet Pea: \$1000 (Includes \$925 tax deduction, one preview ticket, patron reception, and two special summer tours.)

Morning Glory: \$500 (Includes \$425 tax deduction, one preview ticket, patron reception, and one special summer tour.)

Snapdragon: \$250 (Includes \$175 tax deduction, one preview ticket, and patron reception.)

Preview Party Patron Reception: Wednesday, April 26, 2006, 5-6 p.m.
 Museum Director Bill Griswold will greet patrons in the new addition for a sneak peek at the Friends' community room.

I/We cannot attend, but would like to make a tax deductible contribution to Art in Bloom: \$ _____
 (Patrons and donors of \$100 or more will be included in the program as listed below if this form is received by April 12.)

Listing for the program: _____

I/We wish my contribution to be anonymous (circle one): [Yes] [No]

\$ _____ check enclosed, payable to **Art in Bloom**

Charge \$ _____ to my credit card (circle one): [VISA] [Mastercard] [Discover]

Card Number: _____ Expiration Date: _____

Name on card (please print): _____

Signature: _____

Name: _____ **Address:** _____

City, State, Zip: _____ **Daytime Phone:** _____

Guest Names: _____



Please RSVP by April 17. Space is limited.

Your tickets will be held at the registration table the day of the event.

Make your check payable to Art in Bloom.

Please mail the reservation form, including your choice of payment, to:

**Art in Bloom
 2400 3rd Avenue South
 Minneapolis, MN 55404**

Or, use your credit card.
 Credit card reservations can be sent by fax to: (612) 870-6315 or by telephone at: (612) 870-3279