2026 UNDERWRITING CONTRACT

The Crystal Charity Ball – December 12, 2026

NAME _____

ADDRESS _____ CITY/STATE _____ ZIP _____

E-MAIL _____ PHONE _____

ASSISTANT NAME *(IF APPLICABLE)* _____ E-MAIL _____ PHONE _____

PERSON TO RECEIVE ALL BENEFITS (INCLUDING BALL AND UNDERWRITING PARTY INVITATIONS)

Those donors who have committed by October 1 at the Angel Level and above will receive an invitation for two to the Underwriter's Party.

NAME _____ E-MAIL _____ PHONE _____

ADDRESS _____ CITY/STATE _____ ZIP _____

CRYSTAL CHARITY PRINTING AND PUBLICATIONS **PRINT EXACTLY AS NAME SHOULD APPEAR AND CIRCLE ONE ALPHABETIZING LETTER**

Please use the following name for Underwriter listing in all Crystal Charity Ball publications.

NAME _____ OR ☐ **I (We) prefer not to be listed in any printed materials.**

*IF YOUR DONATION LEVEL INCLUDES A CHILDREN'S BOOK PAGE AND YOU ARE ACCEPTING PRIOR TO AUGUST 1ST, PLEASE COMPLETE THE RED CHILDREN'S BOOK FORM.

ANGEL OF LIGHT ($500,000 to $999,999)

ACCEPT DECLINE

- ☐ ☐ Two Ball Seats for every $6,000 donated (up to 20)
- ☐ ☐ Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*
- ☐ ☐ Gift delivered prior to the Ball
- ☐ ☐ Invitation for two to Circle of Angels Dinner

ANGEL OF HOPE ($250,000 to $499,999)

ACCEPT DECLINE

- ☐ ☐ Two Ball Seats for every $6,000 donated (up to 20)
- ☐ ☐ Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*
- ☐ ☐ Gift delivered prior to the Ball
- ☐ ☐ Invitation for two to Circle of Angels Dinner

GILDED ANGEL ($100,000 to $249,999)

ACCEPT DECLINE

- ☐ ☐ Two Ball Seats for every $6,000 donated (up to 20)
- ☐ ☐ Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*
- ☐ ☐ Gift delivered prior to the Ball
- ☐ ☐ Invitation for two to Circle of Angels Dinner

GABRIEL'S ANGEL ($60,000 to $99,999)

ACCEPT DECLINE

- ☐ ☐ Two Ball Seats for every $6,000 donated (up to 20)
- ☐ ☐ Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*
- ☐ ☐ Gift delivered prior to the Ball
- ☐ ☐ Invitation for two to Circle of Angels Dinner

GUARDIAN ANGEL ($30,000 to $59,999)

ACCEPT DECLINE

- ☐ ☐ Two Ball Seats for every $6,000 donated
- ☐ ☐ Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*
- ☐ ☐ Gift delivered prior to the Ball
- ☐ ☐ Invitation for two to Circle of Angels Dinner

ARCHANGEL ($18,000 to $29,999)

ACCEPT DECLINE

- ☐ ☐ Two Ball Seats for every $6,000 donated
- ☐ ☐ Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*

CRYSTAL ANGEL/CHILDREN'S BOOK ($12,700 to $17,999)

ACCEPT DECLINE

- ☐ ☐ Four Ball Seats
- ☐ ☐ Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*

CRYSTAL ANGEL ($12,000 to $17,999)

ACCEPT DECLINE

- ☐ ☐ Four Ball Seats

ANGEL/CHILDREN'S BOOK ($6,700 to $11,999)

ACCEPT DECLINE

- ☐ ☐ Two Ball Seats
- ☐ ☐ Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*

ANGEL ($6,000 to $11,999)

ACCEPT DECLINE

- ☐ ☐ Two Ball Seats

UNDERWRITING/CHILDREN'S BOOK ($3,000 to $5,999)

ACCEPT DECLINE

- ☐ ☐ Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*

UNDERWRITING (Up to $5,999)

ACCEPT DECLINE

- ☐ ☐ Recognized in printed publications

RETAIN A COPY OF THIS CONTRACT FOR YOUR RECORDS.
MAKE ALL PAYMENTS PAYABLE TO THE CRYSTAL CHARITY BALL AND MAIL TO:

Candace Winslow, Underwriting Chairman
The Crystal Charity Ball
3838 Oak Lawn Avenue, Suite L150
Dallas, Texas 75219

_____
UNDERWRITER'S SIGNATURE / DATE

CCB MEMBER _____

PHONE _____ E-MAIL _____

PAYMENT INFORMATION AMOUNT OF CONTRIBUTION $ _____

- ☐ **FULL PAYMENT ENCLOSED**
- ☐ **BILL ME FULL PAYMENT DUE SEPTEMBER 2, 2026**
- ☐ **BILL ME HALF PAYMENTS DUE JUNE 2 / SEPTEMBER 2, 2026**

BILLING ADDRESS _____

PLEASE CHARGE MY CREDIT CARD (MASTERCARD, VISA OR AMEX) CREDIT CARD NO. _____ EXP. DATE _____ CVV _____

NAME ON CARD _____ PHONE _____

2026 CHILDREN'S BOOK INFORMATION FORM

The Crystal Charity Ball – December 12, 2026

PLEASE COMPLETE THIS FORM IF YOU ARE AN UNDERWRITER ACCEPTING THE CHILDREN'S BOOK PAGE BENEFIT PRIOR TO AUGUST 1, 2026.

NAME _____ E-MAIL _____ PHONE _____

ADDRESS _____ CITY/STATE _____ ZIP _____

PLEASE CHECK UNDERWRITING LEVEL

- ☐ **ANGEL OF LIGHT** $500,000-$999,999
- ☐ **GILDED ANGEL** $100,000-$249,999
- ☐ **GUARDIAN ANGEL** $30,000-$59,999
- ☐ **CRYSTAL ANGEL/ CHILDREN'S BOOK** $12,700-$17,999
- ☐ **UNDERWRITER/ CHILDREN'S BOOK** $3,000-$5,999
- ☐ **ANGEL OF HOPE** $250,000-$499,999
- ☐ **GABRIEL'S ANGEL** $60,000-$99,999
- ☐ **ARCHANGEL** $18,000-$29,999
- ☐ **ANGEL/CHILDREN'S BOOK** $6,700-$11,999

PHOTOGRAPHY OPTIONS (CHOOSE ONE) THERE WILL BE NO PLACEMENT GUARANTEES

Please check if applicable: ☐ FORMER BALL CHAIR ☐ INACTIVE

☐ **A. USE OFFICIAL CHILDREN'S BOOK PHOTOGRAPHER***

The Crystal Charity Ball encourages use of official photographers who waive their sitting fees for CCB Underwriters who complete their sittings by Friday, August 21.

☐ GITTINGS ☐ HOLT HAYNSWORTH

☐ JAMES FRENCH

Person photographer contacts to arrange sitting:

NAME _____ PHONE _____

EMAIL _____

Sitting to be completed by FRIDAY, AUGUST 21, 2026.
Proofs to be selected by FRIDAY, AUGUST 28, 2026.

*Sittings completed by June 7 with proof selection by June 28 will receive a 20% discount on portraits with official Children's Book photographers.

☐ **B. USE A PHOTO FROM A BENEFICIARY CHARITY**

Photos taken by official Children's Book photographers

PREFERRED BENEFICIARY _____

☐ **C. USE ALTERNATE PHOTOGRAPHER**

NAME _____ PHONE _____

EMAIL _____

All alternate photographer photos must be submitted before August 3, 2026 to meet print deadlines.

Email bshaw@crystalcharity.org a 300 dpi, CMYK 6"x 6" digital color image or send through a file transfer service like Dropbox. **Donor** is responsible for submitting the Client Information Form to the CCB office. Collage photos will not be accepted.

PUBLICATION OPTIONS

Please list your child's or pet's name(s) below if they are to appear under the photo. EXACT PRINTING of names and positions in the picture WILL BE DETERMINED BY YOU in conjunction with the photographer WHEN THE PROOF IS SELECTED. Marketing tag lines will not be accepted.

1 _____

NAME AGE GENDER

NAME AGE GENDER

NAME AGE GENDER

NAME AGE GENDER

☐ YES ☐ NO Donor's name to be indexed? _____
(Example: Doe, Jill and Robert) CIRCLE ONE ALPHABETIZING LETTER

☐ YES ☐ NO Donor's name to appear under photo? (SEE ITEM 2)
If yes, print below (Example: "Children of..." "Grandchildren of..." "Compliments of...") If left blank, the previous year's listing will be used.

2 _____

_____

1 Jane and John
2 Children of Jill and Robert Doe
Grandchildren of Mr. and Mrs. Ted Doe

1 Charlie
2 Dog of Jill and Robert Doe

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Candace Winslow, Underwriting Chairman
The Crystal Charity Ball
3838 Oak Lawn Avenue, Suite L150, Dallas, Texas 75219

_____
UNDERWRITER'S SIGNATURE / DATE

CCB MEMBER _____

PHONE _____ E-MAIL _____