December 5, 2011

Aloha!

The mission of Mid-Pacific Institute’s M Club is to foster pride in MPI sports and enhance the competitive excellence of all our athletic programs. This year we will once again celebrate and support the M Club and its mission at the 8th Annual M Club Hall of Fame Gala at the Ko‘olau Ballrooms, on Saturday, February 4, 2012, at 5 p.m.

The evening’s highlights will include the induction of the Koike Family into our MPI Athletic Hall of Fame: Tsuneo Koike ’20 (deceased), Leora Koike Tun ’50, Arthur Koike ’52 (deceased), Will Koike ’53, Sylvia Koike ’55, Lyman Koike ’59, Pierson Koike ’63, Mae Koike Iwamoto ’64, and Lynne Koike Uchida ’66. Our special guest speaker will be Detlef Schrempf, three-time NBA All-Star and two-time Olympian. A sit-down dinner and a silent auction will be featured with a promise for a wonderful time to be had by all.

The funds raised from the past M Club Galas have been instrumental in helping the Athletic Department promote its core values. Thanks to the M Club we have been able to realize many of our program’s needs which support our goal of offering our student-athletes the best possible environment to reach their highest potential.

Please consider showing your support for our student-athletes by participating in this event. Sponsor tables and individual seats are available, and contributions to the silent auction are greatly appreciated. Kindly respond by January 20, 2012. For additional information, please call Alumni Director Kerry Wheeler at 951-8856 or alumni@midpac.edu.

We look forward to seeing you on February 4th!

Sincerely,

Jo Ito
Director of Athletics

Carole Fujinaka
Co-Chair
Parent of Dane ’11

Renee Protacio
Co-Chair
Parent of Justin ’11, Brooke ’15
□ **TABLE SPONSORSHIPS:** $_________
  □ PLATINUM $10,000  □ SILVER $5,000  □ BRONZE $2,500

□ **INDIVIDUAL SEAT(S) ** _____ @ $125 $_________

□ **CASH DONATION** $_________

**TOTAL** $_________

Name: _______________________________________________________________________________________

Address: _____________________________________________________________________________________

E-mail: _____________________________________________________________________________________  Day Phone: __________________________

Name of each person attending: __________________________________________________________________

___________________________________________________________________________________________

Special requests (e.g. wheelchair, vegetarian meal): ______________________________________________

Please seat me with: __________________________________________________________________________

Team(s), if applicable: ________________________________________________________________________

Payment information (check one):

_____ Check (make checks payable to *Mid-Pacific Institute*)

_____ Credit Card #: ___________________________________________  Exp. Date: __________

    Circle one: Amex  Discover  MasterCard  Visa

Authorized Signature: ___________________________________________  Date (required): __________

PLEASE RETURN THIS FORM WITH PAYMENT BY 1/20/12 TO:

*Mid-Pacific Institute*

Institutional Advancement Office
2445 Ka‘ala Street
Honolulu, HI 96822

FAX: 973-6134

*Mid-Pacific Institute is a non-profit educational charitable organization, Federal Tax ID #99-0073514. For more information, contact Kerry Wheeler at 951-8856 or alumni@midpac.edu.*
Auction Donation Contract 2012

Donor: ___________________________________________________________________________________________
(as you wish to be acknowledged in the program)

Tax Identification # for donations valued at $500 or more: ___________________________________________________
(For more information, see IRS Form 8282.)

Contact: _____________________________________________________    E-mail: ___________________________
Address: _____________________________________________________ Phone: ___________________________
______________________________________________________    FAX: ___________________________

Detailed Description of Donated Item(s):
Donor’s Estimate of *Retail Value:

1) ___________________________________________________________ $____________________________
   Restrictions / Time Limitations:________________________________________________________________

2) ___________________________________________________________ $____________________________
   Restrictions / Time Limitations:________________________________________________________________

3) ___________________________________________________________ $____________________________
   Restrictions / Time Limitations:________________________________________________________________

* The retail value is based on what I believe is the fair market value and is made with no prejudice. I warrant that the goods are
within my possession and that I am empowered to donate them. I indemnify Mid-Pacific Institute, its trustees, and employees from
any harm that may come from accepting the above listed item(s) and recognize that in turning it/them over, I relinquish ownership.

If donation is a gift certificate, please date from 2/4/12.

Delivery: ___________________________ Instructions or Comments: ___________________________
___ Items are enclosed
___ Items need to be picked up
___ Items to be delivered to MPI (by 1/20/12)

The Donor agrees to provide item(s) and/or services as described above to be auctioned.

Donor Signature ___________________________ Title ___________________________
Print Donor Name ___________________________ Date ___________________________

PLEASE RETURN CONTRACT AND ITEM BY 1/20/12 TO:
Mid-Pacific Institute
Institutional Advancement Office
2445 Ka’ala Street
Honolulu, HI 96822

Mid-Pacific Institute is a non-profit educational charitable organization, Federal Tax ID #99-0073514. For more information, contact Kerry Wheeler at 951-8856 or alumni@midpac.edu.