

TMA FOUNDATION 33<sup>RD</sup> ANNUAL GALA

BEACH

party

APRIL 17, 2026

Omni Corpus Christi

during TMA's TexMed 2026

Please list company, foundation, or individual EXACTLY as it should appear in printed/electronic media.

Please check if you wish to remain anonymous.

*TMAF is a 501(c)(3) organization and contributions are tax deductible to the full extent of the law.*

METHOD OF PAYMENT

**PLEDGE** – Payment will be sent at a later date. (All sponsorship payments must be received by **March 15, 2026**)

Enclosed is my check for \$ \_\_\_\_\_ Please make check payable to TMA Foundation.

Credit card payment made online at [www.texmed.org/Gala](http://www.texmed.org/Gala)

**We wish to decline our table(s) at the gala** (The charitable contribution amount of this donation will be the full value of the gift.)

Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

This donation is in honor/memory of: \_\_\_\_\_

I'm sorry we can't attend, but we wish to contribute the following \$ \_\_\_\_\_ to the \$10,000 matching The McGovern Challenge.

Signature \_\_\_\_\_

**PLEASE SEND  
COMPLETED FORM TO:**

**William Emerson**  
TMA Foundation  
401 W. 15th Street  
Austin, TX 78701

For questions about this form, please call  
**William** at (800) 880-1300, ext. 1663  
or e-mail [william.emerson@texmed.org](mailto:william.emerson@texmed.org).