

# HAVANA Nights

## COMMITMENT FORM

2026

Donor Name: \_\_\_\_\_

Organization Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

### SPONSORSHIP LEVELS

- ☐ \$5,000 Havana Night Sponsor    ☐ \$1,000 Cafecito Sponsor    ☐ \$100 Individual Ticket(s) Qty: \_\_\_\_  
☐ \$2,500 Domino Sponsor    ☐ \$750 Table Sponsor    ☐ Underwriting

Checks should be made payable to the Archdiocese of Miami and returned to:  
9401 Biscayne Blvd. Miami Shores, FL 33138

Pay by credit card or mail payment to the above address at your earliest convenience.

Credit card#: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Please circle:            Visa            MasterCard            American Express

Name as it appears on the card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Signature: \_\_\_\_\_

PLEASE REMIT COMMITMENT FORM AS SOON AS POSSIBLE. THANK YOU!

Thank you for your commitment to the "Havana Nights" event. Proceeds will benefit the Unaccompanied Minors Program within Catholic Charities of the Archdiocese of Miami.

To register online: [www.adomdevelopment.org/havananights](http://www.adomdevelopment.org/havananights)  
For more information, you may email [events@theadom.org](mailto:events@theadom.org) or call 305-762-1293.