

CATHOLIC CHARITIES DIOCESE OF PALM BEACH  
 17<sup>TH</sup> ANNUAL  
 CARITAS DEI BISHOP'S GALA  
 2027

*Beyond the Palms*  
 WEDNESDAY,  
 FEBRUARY 3, 2027  
 BREAKERS HOTEL | PALM BEACH

*2027 Award Recipients*

**BISHOP'S CHARITY MEDAL AWARD RECIPIENT**  
 Mr. John Herrick

**CARITAS DEI AWARD RECIPIENT**  
 Mrs. Lois Pope

**CARITAS SPIRITUS SANCTUS AWARD RECIPIENTS**  
 Mrs. Catalina Pines  
 Mr. Robert and Mrs. Julie Reveley

**CARITAS CHRISTI AWARD RECIPIENT**  
 Rev. Gabriel Ghanoum

*2027 Gala Host Committee*

**CHAIRMAN EMERITUS**  
 Marietta Muiña McNulty

**CO-CHAIRPERSONS**  
 Amy Acierno | Karmita Gusmano | Florence Metzger Berney

**SPONSORSHIP OPPORTUNITIES**

*Recognition at event on all collateral materials according to giving level*

**Kindly Respond by December 15, 2026**

For event seating contact Amyleigh Atwater  
 at [aatwater@ccdpb.org](mailto:aatwater@ccdpb.org) | 561-352-9552

- Crystal Guardians of Hope:** \$1,000,000 & above  
(Premier Seating)
- Presenting Guardians of Hope:** \$100,000  
(Premier Seating)
- Gala Guardians of Hope:** \$50,000  
(Premier Table of 12 seats)
- Gala Platinum Hope Angels:** \$25,000  
(Premier Table of 10 seats)

- Gala Gold Hope Angels:** \$15,000  
(Table of 10 seats)
- Gala Silver Hope Angels:** \$10,000  
(8 reserved seats)
- Gala Bronze Hope Angels:** \$6,000  
(4 reserved seats)
- Gala Hope Angels:** \$3,500  
(2 reserved seats)

How would you like your sponsorship to be listed (if applicable): \_\_\_\_\_

**RESERVE A TABLE OR TICKET(S)**

- \$6,500 Per Table** (10 Seats) qty \_\_\_\_\_
- \$650 Per Individual Ticket** (1 Seat) qty \_\_\_\_\_
- I/We are unable to attend but wish to donate our table(s)/ticket(s)
- I/We are unable to attend but wish to make a donation in the amount of: \$ \_\_\_\_\_

**PAYMENT INFORMATION**

- Please send me an Invoice
  - Check enclosed for \$ \_\_\_\_\_ payable to **Catholic Charities**
- Please charge my:  Visa  Mastercard  AmEx  
 in the amount of: \$ \_\_\_\_\_

Name on Card: \_\_\_\_\_  
 Card Number: \_\_\_\_\_  
 Exp. Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_

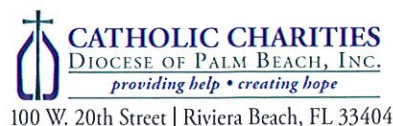
**CONTACT INFORMATION**

Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**GUEST NAMES** Due by December 15, 2026  
 For event seating contact Amyleigh Atwater at [aatwater@ccdpb.org](mailto:aatwater@ccdpb.org) | 561-352-9552

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**MAIL IN OR REGISTER ONLINE**  
[www.ccdpb.org](http://www.ccdpb.org)



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