

2018 CATHOLIC CHARITIES GALA

The favor of a reply is requested by February 16, 2018

Name _____

Address _____

Telephone _____ Email _____

I/We will attend the Gala on March 4, 2018. Please reserve _____ seats at \$175 per person.

Please reserve a table of eight with half-page ad for \$2,000.

I/We are unable to attend. Enclosed is a contribution of _____.

Please charge my credit card.

Card Type: MasterCard Visa AmEx Discover

Card # _____ Exp. Date _____

Signature _____

*Checks may be made payable to Catholic Charities.
Please indicate seating preference on the reverse side.*

