

Name _____

Address _____

Contact Phone _____

Email _____

_____ Guest(s) at \$65 each \$ _____

_____ Table(s) of 8 at \$520 \$ _____

I/We cannot attend, but would like to make a donation in the amount of \$ _____

Pay by: Check enclosed in the amount of \$ _____

Visa MasterCard in the amount of \$ _____

Card # _____ - _____ - _____ - _____ Exp ____ / ____ CVV: _____

Name on Card (please print) _____

Signature _____ Date ____/____/____

If this is a sponsorship table, please indicate sponsor _____

**Please mail this card to Sunrise Rotary at
P.O. Box 900, Tacoma, WA 98402**

Please seat us with the people listed below. They will be sending in their reservations separately.

Enclosed is a payment for a table of (8) eight. The following people will be seated at my/our table as guests. (Please include addresses, phone numbers and email addresses for your guests.) Thank you!

1) _____

2) _____

3) _____

4) _____

5) _____

6) _____

7) _____

8) _____
