

# March 14th 2020 Irish Dinner Fundraiser Reservation/Donation Form

Name \_\_\_\_\_

Street Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

\_\_\_\_ I/We will attend the dinner.      \_\_\_\_\_ Total# Attending (\$20/Person )

\_\_\_\_ I Would like to make an additional contribution of \_\_\_\_\_

\_\_\_\_ I Cannot attend, but enclosed is a contribution of \$ \_\_\_\_\_

For credit card payment (Visa, MasterCard, Discover ) Card #

Expiration Date \_\_\_\_\_ CCV \_\_\_\_\_

Signature (for credit card) \_\_\_\_\_