

CCSV CHRISTMAS FUNDRAISING & 90TH GALA RSVP CARD

Please respond by December 11, 2017

NAME/S: _____

ADDRESS: _____

CITY: _____ ZIP _____ PHONE: _____

EMAIL: _____

I WOULD LIKE TO RESERVE:

_____ Individual adult ticket/s at \$100 each

_____ Individual child ticket/s at \$45 each
(under 12 years & is served children's menu)

_____ Table/s of eight (8 guests) at \$800/table

_____ Table/s of ten (10 guests) at \$1000/table

Please list the names of your guests on the space provided inside this card.

PLEASE LIST THE NAMES OF YOUR GUESTS

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

**Entrée for children under 12 years is taken from the children's menu and NOT adult menu.*

**Vegetarian available upon request.*

Raffle ticket payment enclosed \$ _____

Enclosed is my check payable to Cathedral Chapel of St. Vibiana

I'm/We're unable to attend. Enclosed is a gift donation of \$ _____ in support of Cathedral Chapel Parish.

Please charge my: Visa/Mastercard/Amex *

**** A surcharge of 3.66% will be added to all credit card transactions.**

CREDIT CARD INFORMATION

Name on Card _____

Card number _____

Expiration Date _____

Security (CVV) code (on back) _____

Signature _____

Charge Amount \$ _____

*** A 3.66% surcharge will be added to your total amount.**

PRINT THIS FORM AND MAIL IT TO THE PARISH OFFICE WITH YOUR PAYMENT &/OR CREDIT CARD INFORMATION.

Questions? Please call Nancy Sheehan at 323-930-5976.

For federal income tax purposes, the amount deductible as a charitable contribution is the price of this ticket less its fair market value.