

Use this form ONLY if making reservations by personal check. Please use online ordering if payment is made by credit card.



2012 Membership Dinner and Grant Vote Reservation Form

Please R.S.V.P. by Friday, February 17, 2012

When: Friday, March 2, 2012 **Time:** 5:30 p.m. Check-In **Cost:** \$55.00 by Check/\$58.00 by Credit Card
Where: The Crowne Plaza Cabaña Hotel, Mediterranean Ballroom, 4290 El Camino Real, Palo Alto

Your Name: _____

Email: _____

Phone: _____

An email confirmation will be sent, so please print clearly.

Reserved Table Seating for Groups of 10 @ \$550

Please provide your table attendees' names & entrée selections below.

_____ @ \$550.00 \$ _____

Individual Dinner Ticket(s) @ \$55 per person

Please provide any of your guests' names and entrée selections below

Your Dinner Selection: Stuffed Chicken Breast _____ Mushroom Wellington _____

_____ @ \$55.00 \$ _____

I am unable to attend, but would like to make a tax-deductible donation to help underwrite the cost of the dinner.

\$ _____

TOTAL \$ _____

Please include the names, email address and entree selection of your guests here:

Name _____
Email _____
Entree Selection: Stuffed Chicken Breast _____ Mushroom Wellington _____

Name _____
Email _____
Entree Selection: Stuffed Chicken Breast _____ Mushroom Wellington _____

Name _____
Email _____
Entree Selection: Stuffed Chicken Breast _____ Mushroom Wellington _____

Name _____
Email _____
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Email _____
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Name _____
Email _____
Entree Selection: Stuffed Chicken Breast _____ Mushroom Wellington _____

Please R.S.V.P. no later than Friday, February 17, 2012

Mail the completed RSVP form along with your payment made payable to:

100 Women Charitable Foundation, P.O. Box 3418, Los Altos, CA 94024

(Tickets will NOT be available the night of the event, and reservations MUST be made in advance in order to attend.)

For questions, please contact Mary Rouleau at 650.968.6480 or vrmtnr@aol.com

OFFICE USE ONLY: Check No. _____ Amount \$ _____ Date: _____