



**Please respond before
October 30, 2009.**

Name _____

Address _____

City _____ State _____ Zip _____

Telephone _____

Email _____

Please reserve _____ seat(s) at \$55 ea. \$ _____

Please reserve _____ table(s) for 10 at \$500 ea. \$ _____
(Please list names on back of card, full table payment due with reservation.)

Raffle Tickets \$25 ea./5 for \$100 \$ _____

Cash or Anonymous Donation* \$ _____

Sponsorship Reservation*

- _____ Diamond Sponsor \$2,500+
- _____ Platinum Sponsor \$1,000+
- _____ Silver Sponsor \$500+
- _____ Gold Sponsor \$250+
- _____ Bronze Sponsor \$150+
- _____ Friends & Family \$100+



Total Amount Enclosed \$ _____

- Cash
- Check (Payable to PCHS Women's Club)
- Visa
- MasterCard

Name on Card _____

Account Number _____

Security Code (Last 3 # on back) _____

Expiration Date _____

Signature _____

*Please check to see if your gift will be matched by your employer.
Thank you for supporting our school.

The following would like to sit together at a table.
Payment of \$500 is enclosed.

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

