



Please complete and return this form.

Don't hesitate to contact us if you have questions at (510) 295-0115.

____ Regrettably, I/we cannot attend, but please accept this tax-deductible gift of \$_____

TABLE OPTIONS

____ Please reserve the **St. Dominic Table at \$100,000**

10 dinner seats, 10 VIP cocktail reception tickets, verbal recognition, program listing, wine at table.

____ Please reserve the **St. Thomas Aquinas Table at \$50,000**

10 dinner seats, 10 VIP cocktail reception tickets, program listing, wine at table.

____ Please reserve ____ **St. Catherine of Siena Table(s) at \$25,000**

10 dinner seats, 10 VIP cocktail reception tickets, program listing, wine at table.

____ Please reserve ____ **St. Albert the Great Table(s) at \$10,000**

10 dinner seats, 2 VIP cocktail reception tickets, program listing, wine at table.

SEAT OPTIONS

____ Please reserve ____ **St. Rose of Lima Ticket(s) at \$1,000 each**

Each ticket purchased includes one dinner seat, program listing.

____ Please reserve ____ **Standard Ticket(s) at \$500 each**

Each ticket purchased includes one dinner seat.

____ **Sponsor a Dominican! Please reserve ____ St. Juan Macias Ticket(s) at \$500 each**

Each ticket purchased sponsors one dinner seat for a Dominican friar and benefactor program listing

MEAL CHOICE

____ Filet Mignon ____ Roasted Salmon ____ Wild Mushroom Ravioli (V, Vg)

CONTACT INFORMATION (required)

Name

Phone (cell/home)

Email Address

FULFILLMENT OPTIONS

☐ My check payable to **Western Dominican Province** is enclosed.

☐ Please charge my credit card: Visa | MasterCard | AmEx | Discover

Card Number

Exp. Date

CSV

Name on card (please print clearly)

Signature

Billing Address for Card

City

State

Zip