

OUTREACH TO HAITI

“For the Love of a Child” Gala

Enclosed is \$_____ for _____ people.

Please list the attendees together with their meal selection (by number listed below) on the reverse side of this card.

1. Peppercorn & Garlic NY Sirloin w/Marsala Demi-Glace
2. NE Stuffed Sole w/Creamy Lobster Sauce
3. Francaise Chicken Breast with Classic Lemon Butter Wine Sauce
4. Penne Primavera w/Light Cream Sauce

We cannot attend, but would like to make a contribution of \$_____ in support of the children of Haiti.

_____ Yes, you may acknowledge this gift in the Gala program. (Please initial approval).

Please make checks payable to:

Outreach to Haiti

815 Boswell Ave. Norwich, CT 06360

For additional information, or to pay by Mastercard or Visa, please
call: 860-800-3601

Tickets will not be mailed - **RSVP** list will be at the entrance.

Attendees at my table will include:

Please identify any food allergies

Please **Print First and Last Names**

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