

YES, I/we plan to attend.

_____ Number attending
Please see the reverse side for dinner choices.

NO, I am unable to attend.

_____ Enclosed is my gift for student scholarships.
Please designate my gift in honor of:
Your gift designation will be recognized in the event program.

CONTACT INFORMATION:

Name _____

Address _____

Phone _____

Preferred e-mail _____

\$65 per person - please
make checks payable
to Monroe 2-Orleans
Educational Foundation.

We accept Amex,
Discover, MasterCard and
Visa. Please call 349-9009
to arrange *payment via
credit card.*

Save on postage - please consider using our online reservation system to RSVP:
<https://www.tickettailor.com/events/monroe2orleanseducationalfoundation>

13th Annual Monroe 2-Orleans
Educational Foundation

Celebration

Please indicate the names and dinner choices of those attending. Tables seat up to 10.

Name: _____ Dinner choice: _____

Name: _____ Dinner choice: _____

Name: _____ Dinner choice: _____

Name: _____ Dinner choice: _____

Name: _____ Dinner choice: _____

Name: _____ Dinner choice: _____

Name: _____ Dinner choice: _____

Name: _____ Dinner choice: _____

Name: _____ Dinner choice: _____

Name: _____ Dinner choice: _____

Please seat me with the following party: _____

DINNER CHOICES:

Filet Wrapped
in Bacon

Chicken
Cordon Bleu

Baked Salmon

Vegetarian