

# Hand - N - Hand Silent Night Casino Royale

Please print names of guests and entrée choices on reverse side.

The favor of a **REPLY** is requested by **December 22, 2017**.

**\$75 per person, tables seat 10.**

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

\_\_\_\_\_ Yes, I/We will attend. \_\_\_\_\_ \$75 Ticket(s) \_\_\_\_\_ \$1,000 Table (10 people per table)

\_\_\_\_\_ Yes, I/We will purchase a Corporate Table for \$1000

\_\_\_\_\_ I/We are unable to attend. Enclosed is a tax deductible contribution of \$ \_\_\_\_\_

\_\_\_\_\_ Enclosed is my check (payable to Hand-N-Hand)

\_\_\_\_\_ Interpreting Services Needed

Send payment and RSVP to Jenny Geiken, 5403 Oak Orchard Road, Abrams, WI 54101

For more information contact us at 920.737.0477 or [jlgeiken@hnhnew.org](mailto:jlgeiken@hnhnew.org) or [www.hnhnew.org](http://www.hnhnew.org)