



Kindly respond by:
 March 4, 2008
 Please print clearly

Pre Top **20** Gala
 RSVP

 First Name Last Name

 E-mail address

- Yes, I accept the invitation to the DCAF Reception and Fundraiser Gala
 Number attending _____ \$100 per person Please list names of all guests below.
- I am unable to attend. However, please accept my donation of \$_____

**To sponsor a Member or to raise donations via Sponsorship,
 please visit www.dcaf.org/gala.htm and download the Sponsorship form.**

Your donation is tax deductible!

To pay by credit card Please fill in the information below in its entirety.

Card type: (circle one) VISA MasterCard AMEX Discover

 Card number

_____/_____
 Exp Date (mm/yy)

 Cardholder - name as it appears on card - Please print clearly

3-Digit Code
 Can be found on the back of your card.

 Cardholder Billing Address (Street, City, State, Zip)

(_____) _____
 Phone number where you can be reached (in case we have a problem)

Total Amount

This is the amount that will appear on your statement.

I authorize the Dalmatian Club of America Foundation to process my payment in the amount as indicated above.

 Cardholder Signature

 Date

Please make check payable to: The Dalmatian Club of America Foundation

MAIL TO: DCAF, c/o Norma Baley, 5 N 030 Ridge Lane, Wayne, Illinois 60184-2403

Guests Please share the names of your guests for whom you have purchased tickets, so that their names can be added to the list.

1. _____ 2. _____
 3. _____ 4. _____