



Kindly respond by:
March 19th, 2010

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 Rob Lawson, 4431 Corporate Square, Naples, FL 34104

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. _____