

_____ I will attend the reception to honor

Linda McCrillis

Number of attendees _____ at \$15 each = _____

All donations of \$30 or more (which includes one admission) received by Friday, March 3rd will be listed as a "Friend of the Event"

_____ I cannot attend.

Enclosed is my donation of \$ _____

(Proceeds from the event are donated to a charity of honoree's choice)

Name _____

Address _____

Telephone _____

E-mail _____

Enclosed is my check made payable to:
BCCACW

Please mail checks to:

Marilyn Puchalski, Treasurer - WHMA
565 Wayne Drive
Southampton, PA 18966

For more information, please email ssavage@pearlsbuck.org