

Harvest for Hunger Tickets

_____ We will attend Harvest for Hunger; enclosed is payment
of \$ _____ for _____ tickets at \$60 each

_____ We'd like to reserve a table of 10 for \$750

_____ We cannot attend, but would like to support this worthy cause
with a donation of \$ _____

_____ Please contact me about a sponsorship, program advertisement or
wine donation.

_____ Payment by check _____ Payment by credit card

Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____ Email: _____

How did you hear of this event?: _____

Credit Card Payments:

Name on Card _____

Card # _____ Exp Date _____ Security Code _____

Checks should be made payable to:

Cathedral Kitchen
1514 Federal Street
Camden, NJ 08105

Please mail your reservation to be received by October 22, 2010 or
Fax to: 856-964-6772 or email: karen@cathedralkitchen.org