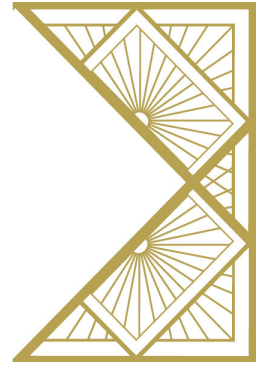




30th Anniversary

MAY DAY FOR HUNGER

Join our pearl anniversary to support the food programs at Saratoga County EOC



Honorary Committee

Names (Please print first and last names, as you would like it to appear on event materials*)

Address: _____

Telephone: _____ Email: _____

Please include me on agency e-newsletter updates.

Yes! I/we would like to support May Day at the following sponsorship level:

- May Day Benefactor \$250 per ticket please reserve _____ tickets
- May Day Patron \$200 per ticket please reserve _____ tickets
- May Day Friend \$150 per ticket please reserve _____ tickets

I would also like to purchase ____ tickets at the regular price of \$100.

*All Honorary Committee members will be listed on the invitations and recognized in the program. To ensure your name is included on the invitation, please return this form by **March 20, 2019**.

Please check all that apply!

- I/We plan to attend and use the ticket/s. Please seat me/us with: _____
- I/We do not plan to use my/our ticket(s)
- I/We cannot serve on the Honorary Committee, but enclosed is a contribution of \$ _____

Payment Information

Amount \$ _____

- Check enclosed (Please make checks payable to: SCEOC)
- Credit Card: Authorized amount \$ _____
 - VISA MasterCard (We do NOT accept American Express)
 - Card Number: _____ Exp. Date: ____ / ____
 - Name on Credit Card: _____
 - Signature: _____

For online reservations and/or sponsorship opportunities, please visit our website at www.saratogaec.org.

Please return this form by March 20, 2019, to Linda Sierzenga as follows: email: l.sierzenga@saratogaec.org, fax: (518) 288-3236, or regular mail: SCEOC, PO Box 169, Ballston Spa, NY 12020 (reply envelope enclosed).

A formal invitation will follow. All reservations are held at the door. Thank you for your support!