



Name \_\_\_\_\_

Rectangular Snip

Mobile Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Attending  Yes  No

I cannot attend. Please find my donation enclosed. \$ \_\_\_\_\_

Number Attending \_\_\_\_\_

Payment Options: Check Enclosed  Credit Card

Make Checks Payable to: **Seven Dreams Education Foundation or SDEF**

\*All online credit card charges are assessed a transaction fee. You can avoid this charge by sending in the RSVP card with payment.

Credit Card Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date   /

Security Code

**All ticket prices increase \$25 per person on Wednesday, February 1.**

Tickets available at [sevendreamsfoundation.org](http://sevendreamsfoundation.org)