



2016 Dinner & Game Night

Event:

Please complete the form and mail along with your check or credit-card information to: Downtown Languages, 221 B Street, Springfield, OR 97477. Your receipt is your ticket. We'll have your name on file at the event.

Date: Location:	Downtown Languages' 4 <sup>th</sup> Annual <i>¡Celebrating Community!</i> FUNdraiser Friday, September 23, 2016, 6:00 p.m. – 9:00 p.m. Vet's Club (Veterans Memorial Building), 1626 Willamette Street, Eugene, OR.
Individual t	ickets are \$65. Host a table of 8 for \$500.
Name:	
Address:	City/State/Zip:
Email:	
Phone:	
I want t	to purchase: Individual tickets @ =
I want	to purchase: Table(s) of 8 @ =
Names of n	ny guests:
I (we) woul	d like to be seated with (table hosted by [name], friends [enter their names], etc.)
☐ Please c	ck, payable to <i>Downtown Languages,</i> in the amount of \$ is enclosed.  harge to my credit card ( <i>Visa, Mastercard, AmEx, Discover, PayPal</i> ).  provide your billing information and <b>SIGN</b> below. Credit cards are processed by PayPal.
Card No	Exp CSC Code
Name o	n card (please print)
Billing A	ddress (if different from above)
Billing C	ity/State/ZIP (if different)
Email Ad	ddress (if different)
Phone (i	f different)

Signature \_\_\_\_\_ Date \_\_\_\_\_