

RSVP

RSVP by mail by completing this card (front and back), include payment and send to: LAG c/o Lori Stenovich, 20420 Via Castellon, Yorba Linda CA 92886.

Name: _____

Billing Address: _____

Phone: _____ Email: _____

I will be attending the Littlest Angel Guild's Pursesally Yours luncheon at \$85 per person

I will be bringing _____ guests *(Please list table guests on back of card)*

I cannot attend but wish to donate \$ _____ to CHOC

Enclosed is my check for \$ _____ made payable to: CHOC / Littlest Angel Guild

I wish to pay by credit card # _____ Expires _____

CVV code: _____

Signature of cardholder

RSVP with payment must be received by March 1, 2018.

Table seating will include you and up to 9 guests. Please provide a mobile number for each guest to be pre-registered with the auction bidding system.

Your Name: _____ mobile #: _____

Guest 1: _____ mobile #: _____

Guest 2: _____ mobile #: _____

Guest 3: _____ mobile #: _____

Guest 4: _____ mobile #: _____

Guest 5: _____ mobile #: _____

Guest 6: _____ mobile #: _____

Guest 7: _____ mobile #: _____

Guest 8: _____ mobile #: _____

Guest 9: _____ mobile #: _____

For further information, visit www.littlestangelguild.org. Questions and dietary requests, call (714) 779-3431