



DONATE A "SIGN ME UP" PARTY

Contact Person: _____

Signature: _____

Address: _____

Phone Number: _____

Email Address: _____

Party Name/Theme: _____

Party Date: _____

How Many Guests: _____ (please indicate individuals or couples)

Item Value (per person/per couple): _____

Please Return Completed Form to:

Christy Scango, christywesch@hotmail.com

Christy Streets, chalsteadmd@gmail.com

Shamrock Shindig Gala & Auction

c/o Front Office

