

Complete all and return

Name: _____

Address: _____

Phone Number: _____

If attending the number of guests: _____
Please list names of guests.

If paying by check:

Amount enclosed: _____

Check number: _____

If paying by Credit Card:

Card Type: (eg Visa) _____

Card Number _____

Expiration date: _____

Security code: _____

Name on Card: _____

P.O. Zip Code of Cardholder _____

Cardholder E-mail _____

We would like to sit with: (We cannot guarantee seating but will do our best to accommodate everyone)

*If you have any questions, or need assistance with reservations, please contact the CNY Dyslexia Center Office at:
315-736-0574*

Public Welcome to attend:

**I will be a participant in the
Family Fun Gala for the
Children's Dyslexia Center Central New York
On Saturday March 12, 2022 as:**

Sponsor A Child
(8 tickets & Gold Leaf) \$5000.00

Sponsor a Scholar
(4 tickets & Gold Leaf) \$2500.00

Partners in Reading:
(2 tickets & silver leaf) \$1000.00

Table Patron
(2 tickets & signage) \$300.00

Patron
(1 dinner ticket) \$50.00

Child (8-18) and Center Alumni:
(1 dinner ticket) \$25.00

**Please return the enclosed RSVP card to
Children's Dyslexia Center by March 3, 2022.**

Mail to: Children's Dyslexia Center Central New York
PO Box 638
Oriskany, NY 13424

____ I will attend the gala and also wish to

____ I am unable to attend but wish to :

____ Donate a Basket for the Family Sponsored Basket Raffle
Make a monetary donation in the amount of \$ _____

***All basket must be delivered to the Center no later than
Thursday, February 21, 2022 (Center hours M-Th 1-6 PM)**

Call (315) 736-0574 for further information

Keep for your records.