

OUTREACH TO HAITI

“For the Love of a Child” Gala

Enclosed is \$_____ for _____ people.

Please list the attendees together with their meal selection (by number listed below) on the reverse side of this card.

1. Peppercorn & Garlic Roasted NY Sirloin, served with Marsala Mushrooms Demi-glace
2. New England Stuffed Sole with Cracker & Crab Filling. Topped with Sherry Cream Lobster Sauce
3. Teriyaki Marinated Chicken Breast with Mango-Pineapple Cilantro Salsa (Gluten Free)
4. Penne Primavera Sautéed with Garlic and Oil in a Light Cream Sauce (Vegetarian)

We cannot attend but would like to make a contribution of \$_____ in support of the children of Haiti.
_____ Yes, you may acknowledge this gift in the Gala program. (Please initial approval).

Please make checks payable to:

Outreach to Haiti

815 Boswell Ave. Norwich, CT 06360

For additional information, or to pay by Mastercard or Visa,
please call: 860-800-3601

Tickets will not be mailed - **RSVP** list will be at the entrance.

Attendees at my table will include:

Please **Print First and Last Names**

	NAME	MEAL #
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____

Please identify any food allergies