

EVVIVA

Saturday, September 24, 2016 | 6:00PM – 9:00PM

Please RSVP by September 3, 2016

*Four Course Dinner accompanied by
Select Wines from Napa Valley*

_____ Tickets @ \$200 Per Person

I am unable to attend.

Please consider including a contribution in honor of Dr. George Spaeth. Proceeds support the Foundation including the International Spaeth Fellowship Program, one of Dr. Spaeth's many legacies.

Please find my contribution of \$_____ enclosed.

SPONSORSHIP OPPORTUNITIES

Searchlight \$4,500 Luminary \$2,700

Beacon \$1,775 Shining Light \$1,000

Name (Please Print): _____

Phone Number: _____

Email: _____

Organization Name: _____

Address: _____

METHOD OF PAYMENT

Check Credit Card: Visa MC Discover

Credit Card Number: _____

Name on Credit Card: _____

Billing Zip Code: _____

Expiration Date: _____ Security Code: _____

MAKE CHECKS PAYABLE TO "GLAUCOMA SERVICE FOUNDATION." YOUR RESERVATION WILL BE HELD AT THE RECEPTION TABLE. THE GLAUCOMA SERVICE FOUNDATION IS A 501(c)(3) CHARITABLE ORGANIZATION. \$75 OF THE PRICE OF EACH \$200 TICKET IS DEDUCTIBLE TO THE EXTENT ALLOWABLE BY LAW.