

# 2011 A Celebration of Heroes, Heart and Hope

## RSVP

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Sponsorship information can be viewed at [www.heroesheartandhope.com](http://www.heroesheartandhope.com) \$ \_\_\_\_\_

TABLE (10 SEATS INCLUDED) \$7000       INDIVIDUAL TICKET \$700

I CANNOT ATTEND, BUT WOULD LIKE TO MAKE A DONATION

### FORM OF PAYMENT:

CHECK PAYABLE TO CHALLENGED ATHLETES FOUNDATION

VISA

MASTERCARD

AMERICAN EXPRESS

CARD NUMBER: \_\_\_\_\_

NAME ON CARD: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_ SECURITY CODE: \_\_\_\_\_

### TABLE GUEST NAMES

1. \_\_\_\_\_ 6. \_\_\_\_\_

2. \_\_\_\_\_ 7. \_\_\_\_\_

3. \_\_\_\_\_ 8. \_\_\_\_\_

4. \_\_\_\_\_ 9. \_\_\_\_\_

5. \_\_\_\_\_ 10. \_\_\_\_\_

Please indicate any guest with a vegetarian or special meal request

Please return this form by  
email: [kristine@challengedathletes.org](mailto:kristine@challengedathletes.org)  
mail: 9591 Waples St. San Diego, CA 92121  
Fax: 858.866.0958

For questions, please call 858-866-0959

**Thank you for your support.**

Ticket price less \$300 is the tax deductible amount allowed by law.

Tax ID # 33-0739596

