

Dwight Economic Alliance Gala SATURDAY, FEBRUARY 24, 2024

Business (if applicable) _____

Please list the names of all guests (including yourself, if attending) and all additional information requested. Choose table for 4 or 8 guests.

Name _____

e-Mail _____

Name _____ Address _____ C/S/Z _____ Phone _____ Steak: _____ Pasta: _____ Vegetarian: _____	Spouse of person to the left? <input type="checkbox"/> Yes <input type="checkbox"/> No Name _____ Address _____ C/S/Z _____ Phone _____ Steak: _____ Pasta: _____ Vegetarian: _____
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Name _____ Address _____ C/S/Z _____ Phone _____ Steak: _____ Pasta: _____ Vegetarian: _____	Spouse of person to the left? <input type="checkbox"/> Yes <input type="checkbox"/> No Name _____ Address _____ C/S/Z _____ Phone _____ Steak: _____ Pasta: _____ Vegetarian: _____
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Name _____ Address _____ C/S/Z _____ Phone _____ Steak: _____ Pasta: _____ Vegetarian: _____	Spouse of person to the left? <input type="checkbox"/> Yes <input type="checkbox"/> No Name _____ Address _____ C/S/Z _____ Phone _____ Steak: _____ Pasta: _____ Vegetarian: _____
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Name _____ Address _____ C/S/Z _____ Phone _____ Steak: _____ Pasta: _____ Vegetarian: _____	Spouse of person to the left? <input type="checkbox"/> Yes <input type="checkbox"/> No Name _____ Address _____ C/S/Z _____ Phone _____ Steak: _____ Pasta: _____ Vegetarian: _____
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_____ # of Guests
 X _____ \$75 each
 = _____ Total Price

Limited seating available.
 Tables will be filled as applications received.

Please send completed form with a check by February 12, 2024 to:
 Dwight Economic Alliance
 132 E. Main Street
 Dwight, IL 60420